

L21000271584

Vicki

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

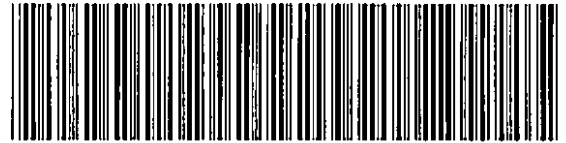
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
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2024 JAN -4 PM 5:54

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ATTORNEYS

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BOARD CERTIFIED - CONSTRUCTION LAW *
CERTIFIED CIRCUIT COURT MEDIATOR **
FL LICENSED CPA & LL.M (TAXATION) ***
BOARD CERTIFIED-REAL ESTATE *****
BOARD CERTIFIED CONDOMINIUM & PLANNED
DEVELOPMENT LAW ^
ALSO ADMITTED IN AL *



OF COUNSEL:

DAVISSON F. DUNLAP, JR.
KRISTIN A. GARDNER
WILLIAM E. WHITNEY

PLANNING & DEVELOPMENT CONSULTANT
MELISSA WARD, AICP
(NOT ADMITTED TO FL BAR)

PLEASE REPLY TO: SRB OFFICE

CHRISTINE SUTHERLIN LADWIG
2063 S. COUNTY HWY 395
SANTA ROSA BEACH, FL 32459
PHONE: 850-231-3315
FACSIMILE: 850-231-5816
CHRISTINE@DUNLAPSHIPMAN.COM
PARALEGAL : KERRI RAMAGE
KERRI@DUNLAPSHIPMAN.COM

December 28, 2023

VIA UPS

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe St., Ste. 810
Tallahassee, FL 32303

RE: Las Azules, LLC / Doc. No. L21000271584

Dear Sir or Madam,

Please find enclosed Articles of Dissolution and check no. 6124 in the amount of \$30.00 to cover the costs of filing and a certified copy of same. Please mail the certified copy to: Christine S. Ladwig, Esq., 2063 S. County Hwy 395., Santa Rosa Beach, FL 32459.

If you have any questions or concerns, please contact our office at the number listed above.

Sincerely,

/s/ Christine S. Ladwig

Christine Sutherlin Ladwig

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Las Azules, I.L.C.

(Name of Limited Liability Company)

The enclosed Articles of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Christine Sutherland Ladwig

(Name of Person)

Dunlap & Shipman, P.A.

(Firm/Company)

2063 County Highway 395

(Address)

Santa Rosa Beach, FL 32459

(City/State and Zip Code)

For further information concerning this matter, please call:

Christine Sutherland Ladwig

(Name of Person)

850

231-3315

at (_____) _____

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

\$25.00 Filing Fee and Certificate of Dissolution

\$55.00 Filing Fee, Certificate of Dissolution &
Certified Copy (additional copy is enclosed)

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is

Las Azules, LLC

2. The Articles of Organization were filed on 06/10/2021 and assigned

document number L21000271584

3. The delayed effective date the dissolution if not effective on the date of filing: 12/15/2023
(effective date cannot be prior to or more than 90 days later than date document is received for filing)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

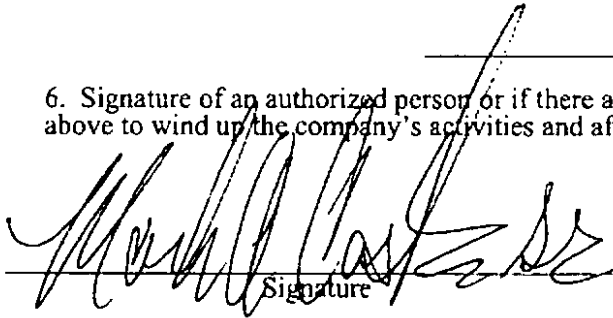
4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).

Dissolution was unanimously approved by the members.

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:

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SEC. CLERK OF STATE
TALLAHASSEE, FL

6. Signature of an authorized person or if there are no members, the signature of the person appointed and listed above to wind up the company's activities and affairs:



Signature

Mark A. Castricone, Sr.

Printed Name

FILING FEE: \$25.00

Notice of Limited Liability Company Dissolution

NOTE: This page is optional

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company: Las Azules, LLC

Document number of Limited Liability Company is: L21000271584

Date of dissolution was: 12/15/2023

Description of information that must be included in a written claim:

A brief description of the nature of the claim, the amount of the claim, and the date the claim was incurred.

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

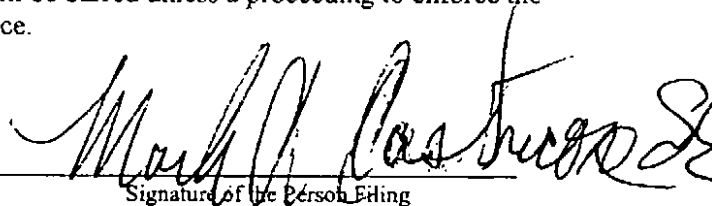
811 Wild Oak Ave

Destin, Florida 32541

A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Mark A. Castricone, Sr.

Printed Name of the Person Filing


Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00