Laa000/169504

(Requestor's Name)							
(Addross)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							
J. HORNE							
MAR - 5 2024							
J 2024							

Office Use Only



700422029147

02/20/24--01007--020 **25.00



COVER LETTER

	Registration Section Division of Corporations				
SUBJEC	T: Surfside Investment Company LLC (Name of Limited Liability Company)				
CCDC	(Name of Limited Liability Company)				
The enclo	sed Articles of Dissolution and fee(s) are submitted for filing.				
Please ret	urn all correspondence concerning this matter to the following:				
	Lori" Hewling (Name of Person)	,,			
	(Name of Person)				
•		٠,			
	(Firm/Company)				
	538 Olympic Way (Address)				
	(Address)				
	Accorth 6A 36162 (City/State and Zip Code)				
	(City/State and Zip Code)				
For furthe	r information concerning this matter, please call:				
-	Lori Hewling at (678) 756-725/ (Name of Person) (Area Code & Daytime Telephone Number)				
	(Name of Person) (Area Code & Daytime Telephone Number)				
Enclosed i	s a check for the following amount:				
X	\$25.00 Filing Fee and Certificate of Dissolution \$\Bigcup \\$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)				
]] I	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Fallahassee, 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 liab	pility company is			
- Surfs	ide Investm	ent Compain	LLC	
2. The Articles of Organizat		4/8/22	and assign	ned 2
document number $\frac{L}{2}$	000169504			ned 24 () 20
B. The delayed effective date (effection Note: If the date inserted in listed as the document's effections.	this block does not me	or more than 90 days later et the applicable statute	than date document is re	ceived for filing), this date will not b
A description of occurrence 605.0707, Florida Statutes,	(copy obs.o/o/ on o	limited liability compack cover letter).		
If there are no members, er	nter the name and add	ress of the person app	pointed to wind up th	ne company's
activities and affairs:		ri Hewling		
Signature of an authorized pove to wind up the company	person or if there are it's activities and affair	no members, the sign s:	ature of the person a	ppointed and liste
An Hay	1		Lori Hewline	 Gr
Signature	•		Printed Name	/

FILING FEE: \$25.00