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Florida Department of State
Division of Corporations
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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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Division of Corporations
Fax Number : (850)617-6383

Account Name : CAPITOL SERVICES, INC.
Account Number : I20160000017
Phone : (855)498-5500
Fax Number : (800)432-3622

**LLC DISSOLUTION OR WITHDRAWAL
BEST BEACH LLC**

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Certificate of Status	0
Certified Copy	1
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K. Brumbley

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COVER LETTER

H24000122185

TO: Registration Section
Division of Corporations**SUBJECT:** Best Beach LLC

(Name of Foreign Limited Liability Company)

Dear Sir or Madam:

The enclosed withdrawal and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

(Name of Person)_____
(Firm/Company)_____
(Address)_____
(City/State and Zip Code)

For further information concerning this matter, please call:

Tina Eroles _____ 281 910-8229
(Name of Person) at (Area Code & Daytime Telephone Number)**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**Enclosed is a check for the following amount:**

- ☐ \$25 Filing Fee ☐ \$30 Filing Fee & Certificate of Status ☒ \$55 Filing Fee & Certified Copy ☐ \$60 Filing Fee, Certificate of Status & Certified Copy

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NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Best Beach LLC

(Name of limited liability company)

Nevada

(Jurisdiction of its organization)

September 29, 2011

(Date registered with Florida Department of State)

M11000004903

(Florida Document Number)

This limited liability company is withdrawing its certificate of authority in this state.

Effective Date, if other than the date of filing: _____ (optional)
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after 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.

Jerry Underhill

(Signature of authorized representative)

Jerry Underhill

(Typed or printed name of signee)

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Filing Fee: \$25.00

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