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(Re	equestor's Name)	
(Ad	ldress)	
(Ad	dress)	
(Cii	ry/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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COVE	RLETTER
TO: Amendment Section Division of Corporations	OF BUSINESS
SUBJECT: DISSOCUTION	OF CORP, (BOACH SNAC)
DOCUMENT NUMBER: E(D#	160/70/695 SHACK,
The enclosed Articles of Dissolution and fee a	re submitted for filing.
Please return all correspondence concerning th	is matter to the following:
BRVCE T. GUARN (Name of Con	1E7C
BEACH SNACK	SHACK INC.
447 NAISH AVE	ompany)
COCCA BEACH, FC	32931
(City/State a	nd Zip Code)
For further information concerning this matter,	please call:
SiAnt (Name of Contact Person)	at (321) 799 / S/ (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
(.	\$43.75 Filing Fee & \$\sum \$\$52.50 Filing Fee, Certified Copy Certificate of Status & Additional copy is enclosed) (Additional copy is enclosed)
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

Filing Fee: \$35