

L03 0000 35966

(Requestor's Name)

(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:

707

Office Use Only



000287082460

000287082460
06/21/16--01030--003 **52.30

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
16 JUN 21 PM 1:57

AUG 11 2016
S. YOUNG



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 22, 2016

GEORGE E EDWARDS
550 SW 3RD STREET #203
POMPANO BEACH, FL 33060

SUBJECT: MRB, L.L.C.
Ref. Number: L03000035966

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
16 JUN 21 PM 1:57

We have received your document for MRB, L.L.C. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Shelia H Young
Regulatory Specialist II

Letter Number: 416A00013137

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MRB, L.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:

GEORGE E EDWARDS
(Name of Person)

GEORGE E EDWARDS, ESQ.
(Firm/Company)

550 SW 3rd. STREET #203
(Address)

POMPANO BEACH, FL 33060
(City/State and Zip Code)

FILED
TALLAHASSEE, FLORIDA

2016 AUG 10 PM 2:31

16 JUN 21 PM 1:57

FILED
STATE
SECRETARY OF
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

GEORGE E EDWARDS, ESQ. at (954) 781-0444
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

p \$25.00 Filing Fee	p \$30.00 Filing Fee & Certificate of Status	p \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	p \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
----------------------	---	---	---

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

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

1. The name of a limited liability company is

MRB, L.L.C.

2. The Articles of Organization were filed on 09-17-2003 and assigned document number

L03000035966

3. The date the dissolution was approved: 12-31-2015

4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 608.441, Florida Statutes, (copy 608.441 on back cover letter).

Rental lease and business activity ended

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
16 JUN 21 PM 1:57

5. CHECK ONE:

☒ All debts, obligations and liabilities of the limited liability company have been paid or discharged.

-OR-

☐ Adequate provision has been made for the debts, obligations and liabilities pursuant to s. 608.4421.

6. All remaining property and assets have been distributed among its members in accordance with their respective rights and interests.

7. CHECK ONE:

☒ There are no suits pending against the company in any court.

-OR-

☐ Adequate provision has been made for the satisfaction of any judgment, order or decree which may be entered against it in any pending suit.

Signatures of the members having the same percentage of membership interests necessary to approve the dissolution:

Signature

Printed Name

Ricki G. Robinson
Betty A. Ginsburg

RICKI G. ROBINSON

BETTY GINSBURG

FILING FEE: \$25.00

**NOTICE OF DISSOLUTION
FOR
FLORIDA LIMITED PARTNERSHIP
OR LIMITED LIABILITY LIMITED PARTNERSHIP**

This notice is submitted by the dissolved limited partnership or limited liability limited partnership named below or the successor entity for resolution of payment of unknown claims against this limited partnership or limited liability limited partnership as provided in s. 620.1807, F.S.

This "*Notice of Dissolution*" is optional and is not required when filing a Certificate of Dissolution.

Name of Dissolved Limited Partnership or Limited Liability Limited Partnership:

MRB, L.L.C.

Description of information that must be included in a claim:

WHO PROVIDED THE SERVICE

WHAT WAS THE SERVICE

WHEN AND WHERE THE SERVICE WAS RENDERED

**WHO REQUESTED THE SERVICE, NAME, ADDRESS AND TELEPHONE
NUMBER**

Mailing address where claims can be sent: (Claims cannot be sent to the Florida Department of State.)

GEORGE E EDWARDS, ESQ

550 SW 3rd STREET #203


POMPANO BEACH, FL 33060

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

Signature of a general partner or a principal of the successor entity:

RICKI ROBINSON

Printed Name


Signature

Fee: No charge if included with Certificate of Dissolution. If filed separately, \$52.50.

FILED
STATE
SECRETARY OF
TALLAHASSEE, FLORIDA

16 JUN 21 PM 1:57

**CERTIFICATE OF DISSOLUTION
FOR**

MRB, L.L.C.

(Name of Florida Limited Partnership or Limited Liability Limited Partnership)

Pursuant to the provisions of section 620.1203, Florida Statutes, this Florida limited partnership or limited liability limited partnership, whose certificate was filed with the Florida Department of State on 09-17-2003, assigned Florida document number L03000035966, hereby submits this Certificate of Dissolution.

FIRST: Reason for dissolution: (State why partnership is submitting dissolution)

RENTAL LEASE AND BUSINESS ACTIVITY ENDED

SECOND: X ⑨ A Notice of Dissolution is attached. (Check box if attached.)

THIRD: Effective date, if other than the date of filing: 12-31-2015

(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

Signatures of each general partner or the person appointed pursuant to s. 620.1803(3) or (4), F.S.:



RICKI G. ROBINSON

Filing Fee: \$52.50
Certified Copy (optional): \$52.50
Certificate of Status (optional): \$8.75

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
16 JUN 21 PM 1:57