## 10400048121

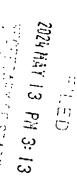
(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
J DE VUS	
្សម្រុក 🐪 វិទី24	

Office Use Only



100429543531

05/13/24--01015--020 +•55.00



## **COVER LETTER**

TO: Registration Section : Division of Corporations	÷
SUBJECT: B, SIMPSON LLC (Name of Limited	Liability Company)
The enclosed Articles of Dissolution and fee(s) are submitted	d for filing.
Please return all correspondence concerning this matter to the	e following:
BARBARA S (Name	of Person)  SOW LLC  Company)
(Firm/	Company)
(e63 Hamine	OCK RD.
MELBOURNE (City/State	FL 32904 anti Zip Code)
For further information concerning this matter, please call:	
BARBARA SIMPSON	at ( <u>32/</u> ) <u>725-/045</u> (Area Code & Daytime Telephone Number)
(Name of Person)  Enclosed is a check for the following amount:   \$\sum \\$25.00 \text{ Filing Fee and Certificate of Dissolution}\$	(Area Code & Daytime Telephone Number)  OR (3-21) (3-98-6296)  555.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)
Mailing Address: Registration Section Division of Corporations P.O. Box 6327	Street Address: Registration Section Division of Corporations The Centre of Tallahassee

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

	ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY
. The name of a limited liabi	B. SIMPSON! LLC
. The Articles of Organization	on were filed on $\frac{JUNE 25, 2004}{}$ and assigned
	4000048121
(effective Note: If the date inserted in	the dissolution if not effective on the date of filing: e date cannot be prior to or more than 90 days later than date document is received for filing) this block does not meet the applicable statutory filing requirements, this date will not be ective date on the Department of State's records.
A description of occurrence 605.0707, Florida Statutes,	e that resulted in the limited liability company's dissolution pursuant to section (copy 605.0707 on back cover letter).
	·
If there are no members, er activities and affairs:	nter the name and address of the person appointed to wind up the company's  BARBARA L. SINCEON
	663 HAINMOCK BB
	MELBOURNE, FL 32904
. Signature of an authorized	person or if there are no members, the signature of the person appointed and listed
bove to wind up the company	y's activities and affairs:
Parlyana G. S.	majon BARBARA L. SIMPSON

FILING FEE: \$25.00