

LOS000120420

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

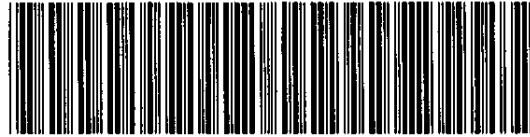
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATION  
15 MAY -8 PM 6:00  
TALLAHASSEE, FLORIDA

**COVER LETTER**

TO: Registration Section  
Division of Corporations

SUBJECT: Vibekah Fallen Two, LLC  
(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:

Rebekah Robinson  
(Name of Person)

Vibekah Fallen Two, LLC  
(Firm/Company)

P.O. Box 82216  
(Address)

Tampa, FL 33682  
(City/State and Zip Code)

For further information concerning this matter, please call:

Rebekah Robinson at ( 813 ) 347-3031  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

\$25.00 Filing Fee and Certificate of Dissolution

— \$55.00 Filing Fee, Certificate of Dissolution &  
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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

15 MAY - 8 PM 6:00

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS

ARTICLES OF DISSOLUTION  
FOR  
A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is

VibeKah Fallen Two, LLC

2. The Articles of Organization were filed on 12/19/2005 and assigned

document number LD5000120420

3. The delayed effective date the dissolution if not effective on the date of filing: \_\_\_\_\_  
(effective date cannot be prior to or more than 90 days later than date document is received for filing)

4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).

Limited Liability Company has ceased all business  
associated with this company

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:

6. Signature of an authorized person or if there are no members, the signature of the person appointed and listed above to wind up the company's activities and affairs:

Rebekah Robinson  
Signature

Rebekah Robinson  
Printed Name

FILING FEE: \$25.00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

15 MAY - 8 PM 6:00

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SECRETARY OF STATE  
DIVISION OF CORPORATION