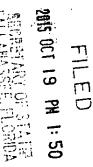
# L0600121872

(Re	equestor's Name)			
(Address)				
(Address)				
(Cil	ty/State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				



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#### **COVER LETTER**

TO:

Registration Section Division of Corporations

SUBJECT:

### IDEAL BRANDS TRADING CO 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:

Deborah Kriner			
(Name of Person)			
IDEAL BRANDS TRADING CO LLC			
(Firm/Company)			
1061 E. INDIANTOWN RD., SUITE 500			
(Address)			
JUPITER, FL 33477			

(City/State and Zip Code)

For further information concerning this matter, please call:

Deborah Kriner	<sub>at</sub> 561 472-0232
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
<b>■</b> \$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

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

FILED 20\$ OCT 19 PM 1:50

 $\mathcal{H} = \{\{i, k\}, \dots, k\}$ 

1.	The name of a limited liability comp	any is	SECRETARY OF STATE TALLAMASSEE, PLORIDA		
2.	The Articles of Organization were fi	led onNOVEMBER 5, 2013	and assigned		
	document numberL06000121872				
3.	Note: If the date inserted in this block	ve 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) serted in this block does not meet the applicable statutory filing requirements, this date will not be nt's effective date on the Department of State's records.			
4.	A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 05.0707, Florida Statutes, (copy 605.0707 on back cover letter).				
Inactive Company					
5.		me and address of the person	appointed to wind up the company's		
Suite 500					
	Jupiter	FL 33477			
6. lis	Signature of an authorized person or ted above to wind up the company's	if there are no members, the activities and affairs:	signature of the person appointed and		
. (		Deborah Kr	iner		
	Signature		Printed Name		
		FILING FFF: \$25.00			