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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: WBSC Enter Ovises, 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:
Kathleen Sterner (Name of Person)
WBSC ENTERPRISES, LLC (Firm Company)
3000 SE Santa Anita St
Port Sthocie Fla 34952 (City/State and Zip Code)
For further information concerning this matter, please call:
Kathleew Sterner at (772) 206-1270 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee and Certificate of Dissolution \$\square\$ \$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 Address:

Registration Section **Division of Corporations** The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liability company is WBSC ENTEVPLISES, LLC 33
2.	The Articles of Organization were filed on April 13, 2007 and assigned
	document number <u>L 070000 4 028</u>]
3.	The delayed effective date the dissolution if not effective on the date of filing: Available 18,2021 (effective date cannot be prior to or more than 90 days later than date document is received for filing) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document'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 605.0707, Florida Statutes, (copy 605.0707 on back cover letter). CLOSED ON HOGUST 9,202(
5.	If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs: Kath een Sterner
	Port St Lucie, Fla 34952
6. ab∙	Signature of an authorized person or if there are no members, the signature of the person appointed and listed ove to wind up the company's activities and affairs:
	Kathleen Storner Printed Name

FILING FEE: \$25.00