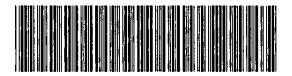
## L050000 24144

(Re	equestor's Name)	<del></del>
(Ac	ddress)	
(Ac	idress)	
(Ci	ty/State/Zip/Phone	<del>;</del> #)
PICK-UP	☐ WAIT	MAIL
<u>(</u> Ви	usiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
		ļ
·		

Office Use Only



100269703261

02/27/15--01004--007 \*\*25.00



JUN 1 6 2015 J SHIVERS



JU



March 11, 2015

BRUCE ALLIGOOD 23209 N CR 1491 ALACHUA, FL 32615

SUBJECT: B & S BUSINESS ADVISORS LLC

Ref. Number: L08000024144

We have received your document for B & S BUSINESS ADVISORS LLC and your check(s) totaling \$25.00. 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 the corrected original and one copy of 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.

Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 615A00004929

#### **COVER LETTER**

	egistration ivision of	Corporations		•		
SUBJEC*	Т:	B+5	Business	Ad	visors	LLC
			Name of Lin	nited Liab	oility Company	,
Dear Sir o	or Madam	:				
The enclo	sed Stater	nent of Term	ination and fee(s)	are subm	itted for filing.	
Please ret	urn all coi	respondence	concerning this n	natter to t	he following:	
B	ruce	Name of P	igeod erson		-	
B	+5 T	3 winess	Advisor:	<u> </u>	<u>-</u>	
		Firm/Com	pany			
27	3209	N. CR	1491			
		Address			-	
	AlAC	hua, F	L 376 p Code	15	_	
	City	State and Zij	p Code			
7	tballic	100d @1	windstream future annual repo	net		
E-mail a	ddress: (t	be used for	future annual repo	ort notific	ation)	
For furthe	er informa	tion concerni	ng this matter, ple	ease call:		
Br	Name o	Allig of Person	at (	386 Area Code	U62- Daytime Tel	2305 lephone Number

### STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

#### MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

CR2E141 (2/14)

# ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

ı		
	The Articles of Organization	on were filed on March 6, 2008 and assigned
	document number L080000	24144
3. '	Note: If the date inserted in	the dissolution if not effective on the date of filing: July 1, 2015 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 tive date on the Department of State's records.
<b>1.</b> €	A description of occurrence 605.0707, Florida Statutes,	that resulted in the limited liability company's dissolution pursuant to section (copy 605.0707 on back cover letter).
-	As of January 1, 2015, this I	Limited Liability Company went out of business.
_		
_		
_		
5.	If there are no members, en	ter the name and address of the person appointed to wind up the company's
activities and affairs:	Bruce Alligood	
		27209 North County Road 1491
		Alachua, Florida 32615
		LOR STA
5. S	Signature of an authorized ped above to wind up the cor	person or if there are no members, the signature of the person appointed and mpany's activities and affairs:
4	Ban Deli	Bruce Alligond

FILING FEE: \$25.00