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(Requestor's Name)			
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(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
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(Business Entity Name)			
(Document Number)			
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S. HAWKES

APR 1 6 2009

EXAMINER

· COVER LETTER

TO:	Registration Section Division of Corporations			
SUBJECT: RB Bookkeeping LLC				
(Name of Limited Liability Company)				
The end	closed Articles of Dissolution and fee(s) are subr	mitted for filing.		
Please	return all correspondence concerning this matter	to the following:		
	Ronni Blank			
(Name of Person)				
RB Bookkeeping LLC				
(Firm/Company)				
3085 Center St				
(Address)				
Coconut Grove, FL 33133				
(City/State and Zip Code)				
For further information concerning this matter, please call:				
	Ronni Blank	_{at (} 786 ₎ 287-1849		
	(Name of Person)	(Area Code & Daytime Telephone Number)		
Enclose	d is a check for the following amount:			
\$25.0	30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & S60.00 Filing Fee, Certified Copy (additional copy is enclosed) 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

RB Bookkeeping LLC	
2. The Articles of Organization were filed on 2-10	6-2009 and assigned document number
3. The date the dissolution was approved: 4-06-2	2009
4. A description of occurrence that resulted in the li 608.441, Florida Statutes, (copy 608.441 on back	
Voluntary dissolution.	
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rights and interests. 7. CHECK ONE: There are no suits pending against the control of the cont	tributed among its members in accordance with their respective ompany in any court. the satisfaction of any judgment, order or decree which may be
Signatures of the members having the same percentage	e of membership interests necessary to approve the dissolution:
Signature	Printed Name
Rnni Benu	Ronn: BLANK.