

L100000 84712

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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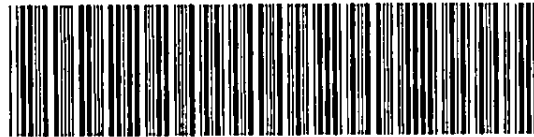
(Business Entity Name)

(Document Number)

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2020 FEB 10 PM 12:37

R. WHITE
MAR 04 2023

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AIRPORT ICE CREAM II, 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:

Brenda Rivers

(Name of Person)

Carrie Concessions, Inc.

(Firm/Company)

3627 DOUGLAS RD

(Address)

COCONUT GROVE, FL 33133

(City/State and Zip Code)

For further information concerning this matter, please call:

Brenda Rivers at 305 505-2065

(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 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**

2020 FEB 10 PM 12:36

1. The name of a limited liability company is

AIRPORT ICECREAM II, LLC

2. The Articles of Organization were filed on August 12, 2010 and assigned

document number L10000084712

3. The delayed effective date the dissolution if not effective on the date of filing: 11/30/2019
(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).

Corporate Reorganization

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

BRENDA RIVERS, Carrie Concessions, Inc.

3627 DOUGLAS RDCOCONUT GROVE, FL 33133

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:


Signature

Brenda Rivers
Printed Name

FILING FEE: \$25.00