

Florida Department of State
 Division of Corporations
 Electronic Filing Cover Sheet

L10000009428

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To:

Division of Corporations
 Fax Number : (850)617-6383

From:

Account Name : WESTON CORPORATE ADMINISTRATION, LLC
 Account Number : 120090000072
 Phone : (954)356-2905
 Fax Number : (954)337-8346

LLC DISSOLUTION OR WITHDRAWAL
BBN, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

2022 OCT -7 PM 2:51

2022 OCT -7 PM 2:51
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

APPROVED
 AND
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OCT 10 2022

2:00pm

COVER LETTER

(((H22000344778 3)))

TO: Registration Section
Division of Corporations

SUBJECT: BBN, 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:

JACQUELINE F RODRIGUEZ

(Name of Person)

WESTON CORPORATE ADMINISTRATION LLC

(Firm/Company)

777 BRICKELL AVE., SUITE 500-96623

(Address)

MIAMI, FL 33131

(City/State and Zip Code)

For further information concerning this matter, please call:

JACQUELINE F RODRIGUEZ

(Name of Person)

954

278-8041

at (

_____) _____

(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

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**ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is
BBN, LLC
2. The Articles of Organization were filed on 09/20/2022 and assigned
document number L10000099428
3. The delayed effective date the dissolution if not effective on the date of filing: 10/06/2022
(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).
THE COMPANY CEASE OPERATION.
5. If there are no members, enter the name and address of the person appointed to wind up the company's
activities and affairs:
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:

X

Signature

Francisco Martinez Colunga

Printed Name

FILING FEE: \$25.00

RECEIVED
FLORIDA DEPT. OF STATE
ALLIANCE CENTER

2022 OCT -7 PM 2:51

APPROVED
AND
FILED

(((H22000344778 3)))

Notice of Limited Liability Company Dissolution**NOTE: This page is optional**

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company: BBN, LLC

Document number of Limited Liability Company is: L06000019715

Date of dissolution was: 10/01/2022

Description of information that must be included in a written claim:

NAME OF CLIENT

DATE OF CLAIM/OCCURANCE

DETAILS OF CLAIM

BILL FOR AMOUNT OF CLAIM, IF ANY

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

777 BRICKELL AVE.

SUITE 500-96623

MIAMI, FL 33131

A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Francisco Martinez Colunga

Printed Name of the Person Filing

X

Signature of the Person Filing