L10000118668

(Requestor's Name)				
* (Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
Special instructions to Filling Officer.				

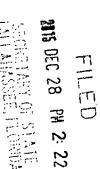
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12/28/15--01017--023 **25.00

12-13/1/5



COVER LETTER

Divisio	n of Corporations				
SUBJECT:	LB TOO LLC				
(Name of Limited Liability Company)					
The enclosed Articles of Dissolution and fcc(s) are submitted for filing.					
Please return all	correspondence concerning this matter to the	following:			
RHONDA GUINAZZO					
(Name of Person)					
CALER, DONTEN, LEVINE, COHEN, PORTER & VEIL, P.A.					
(Firm/Company)					
505 S. FLAGLER DRIVE, SUITE 900					
(Address)					
WEST PALM BEACH, FL 33401					
(City/State and Zip Code)					
For further infor	mation concerning this matter, please call:				
	DELIA LALCHAN	_ at (561	832-9292		
	(Name of Person)	(Area C	ode & Daytime Telephone Number)		
Enclosed is a chec	k for the following amount:				
凶 \$25.00 I	Filing Fee and Certificate of Dissolution		ng Fee, Certificate of Dissolution & Copy (additional copy is enclosed)		

MAILING ADDRESS:

TO:

Registration Section

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

State of the state

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

FILED , 2815 DEC 28 PM 2: 22

1.	The name of a limited liability company is	LB TOO LLC	SECRETARY OF STATE TALLAHASSEE, FLORIDA			
2.	The Articles of Organization were filed on _	11/15/2010	and assigned			
	document numberL10000118668					
3.	The delayed effective date the dissolution if refective date cannot be prior Note: If the date inserted in this block does not relisted as the document's effective date on the Department.	neet the applicable statutory f				
4.	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).					
	605.0707 (2) The consent of all the membe	rs				
	If there are no members, enter the name and a activities and affairs:	ddress of the person appoi	nted to wind up the company's			
6. list	Signature of an authorized person or if there a ed above to wind up the company's activitics	are no members, the signati and affairs:	ure of the person appointed and			
—p	ocusigned by:		•			
—с	COEA57FF8584A6	DAVID B. FI	ERGUSON			
	Signature	Pr	inted Name			

FILING FEE: \$25.00