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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: BOB BIFRMAN AW (Name	of Limited Liability Company)
The enclosed Articles of Dissolution and fee(s) as	re submitted for filing.
Please return all correspondence concerning this	matter to the following:
Gordon Bern	(Name of Person)
	(Name of Person)
	(Firm/Company)
6121 Justin La	(Address)
Las Cruces 1	/M 88007 (City/State and Zip Code)
For further information concerning this matter, pl	
Gordon Berman	at (575) 3/2 - 4/5/ (Area Code & Daytime Telephone Number)
	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount: \$\sumset \begin{align*} \pi \$25.00 Filing Fee and Certificate of Dissolution of the content of the cont	tion
MAILING ADDRESS.	CTDEET/COUDIED ADDRESS.

MAILING ADDRESS:

TO:

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

1. The name of a limit	ed liability company is				
BOB BERMAN	AND GORDON	BERMAN	LLC	·	
2. The Articles of Orga	anization were filed on 🕽	ecember 20,	2010 and assig	ned	
document number _	1 1 0000 1299.	23			
Note: If the date ins	ve date the dissolution if (effective date cannot be prior erted in this block does not nt's effective date on the De	to or more than 90 days meet the applicable st	later than date document is ratutory filing requirements		t be
4. A description of occ 605.0707, Florida St	currence that resulted in tatutes, (copy 605.0707 o	the limited liability on back cover letter).	company's dissolution p	oursuant to section	nc
	as formed to ow	,		in	
-	The property w			\$55. 55. 55.	•
5 If there are no mem	bers, enter the name and	address of the nerso	n appointed to wind up	<u> </u>	•
activities and affairs					
				(A)	
			-		
6. Signature of an auth listed above to wind up	norized person or if there the company's activities	are no members, the s and affairs:	e signature of the persor	n appointed and	
7/1		_	4 0		
lordon Gerr	nan	_ 60	rdon Berman Printed Name	1	
Sign	ature		FITHEU INAILE		

FILING FEE: \$25.00

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: Bob BERMAN AND GORDON BERM	AN L	LO
Document number of Limited Liability Company is: <u>L10007 129 9 23</u>	<u> </u>	
Date of dissolution was: Date The Articler of Direcolution were t	filed.	
Description of information that must be included in a written claim:	# 5 F	17
Name Address Phone Number	0.5 0.5 52.5 52.5 0.75	17 FEB †
Date claim arose		- 6 - 78
Description of the claim	- 1. - 1. - 1. - 1. - 1.	- F
,	## TO	80 60
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corp 60 rdon Berman 6/21 Justin Lane Las Cruces NM 88007	porations)	
	-	

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00

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.