# L1100018005

| (R                                      | equestor's Name   | )            |
|---|-------------------|--------------|
| (A                                      | ddress)           |              |
| (A                                      | ddress)           |              |
| (C                                      | ity/State/Zip/Pho | ne #)        |
| PICK-UP                                 | WAIT              | MAIL         |
| (B                                      | usiness Entity Na | ame)         |
| (Document Number)                       |                   |              |
| Certified Copies                        | Certificate       | es of Status |
| Special Instructions to Filing Officer: |                   |              |
|   |                   |              |
|   |                   |              |
|   |                   |              |
|   |                   |              |

Office Use Only



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02/10/15--01026--016 \*\*55.00

2015 FEB 10 PN 12: 44
SECRETARY OF STATE

### **COVER LETTER**

| TO: Registration Section Division of Corporations  |  |  |  |
|--|--|--|--|
| SUBJECT: BJ + T OF Florida 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:                    |  |  |  |
| Joshua H Simons Jr (Name of Person)  |  |  |  |
| B53T LLC of Florida LCC (Firm/Company)   |  |  |  |
| 135 Downing Drive (Address)  |  |  |  |
| Chesopeake UA 33333 (City/State and Zip Code)  |  |  |  |
| For further information concerning this matter, please call:                                 |  |  |  |
| Toshua H Simons Jr at (157) 483-7735 (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/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FILED
FOR
A LIMITED LIABILITY COMPANY 2015 FEB 10 PM 12: 44

| 1.   | The name of a limited liability company is  B 3 4 T of florida LCC   | SECKETARY OF STATE TALLAHASSEE, FEORIDA                     |  |  |
|--|--|---|--|--|
| 2.   |  | and assigned  |  |  |
|  | document number  |   |  |  |
| 3.   | The delayed effective date the dissolution if not effective on the da<br>(effective date cannot be prior to or more than 90 days lat | ate of filingter than date document is received for filing) |  |  |
| 4. A description of occurrence that resulted in the limited liability company's dissolution purs 605.0707, Florida Statutes, (copy 605.0707 on back cover letter). |  |   |  |  |
|  | LLC was rental house. Ho   | ouse was sold   |  |  |
|  | on November 19,2014  |   |  |  |
| 5.   | If there are no members, enter the name and address of the person activities and affairs:  | appointed to wind up the company's                          |  |  |
|  |  |   |  |  |
| 6.<br>lis  | Signature of an authorized person or if there are no members, the s ted above to wind up the company's activities and affairs:       | ignature of the person appointed and                        |  |  |
|  | Joshu V Simon Ja   | bshua H Simons Ir Printed Name                              |  |  |

**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: BJ&T of Florida LLC   | 2        |
|--|----------|
| Document number of Limited Liability Company is: L110000 \ 8005  Date of dissolution was: 21015  | 5 FEB 10 |
| Description of information that must be included in a written claim:   | PN 12:   |
| LLC was rental house. House was sold Fin   | 44       |
|  |          |
| Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)  |          |
|  |          |
|  |          |
| 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. |          |
| Printed Name of the Person Filing  Printed Name of the Person Filing  Signature of the Person Filing   |          |

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