

L11000065921

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

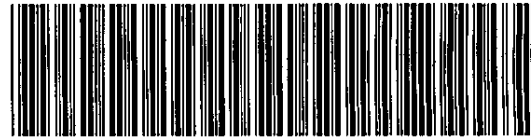
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100291976791

11/10/16--01014--012 **25.00

NOV 14 2016
S. YOUNG

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
16 NOV 10 PM 4:19

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: HB One 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:

Fernado de Almeida Lemos

(Name of Person)

HB One LLC

(Firm/Company)

6303 Blue Lagoon Drive Ste. 200

(Address)

Miami, FL 33126

(City/State and Zip Code)

For further information concerning this matter, please call:

Fernando De Almeida Lemos

(Name of Person)

(305) 373-0123

(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

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
16 NOV 10 PM 4:19

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
16 NOV 10 PM 4: 19

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: HB One LLC

Document number of Limited Liability Company is: L11000065921

Date of dissolution was: 07/31/2016

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


FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
16 NOV 10 PM 4:19

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.

Fernando De Almeida Lemos

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