L11000088948

| (Re | equestor's Name) | | | |
|-------------------------|--------------------|-------------|--|--|
| (Ad | ldress) | * | | |
| (Ad | idress) | | | |
| (Cit | ty/State/Zip/Phone | e #) | | |
| PICK-UP | ☐ WAIT | MAIL | | |
| (Bu | isiness Entity Nan | ne) | | |
| (Document Number) | | | | |
| Certified Copies | _ Certificates | s of Status | | |
| Special Instructions to | Filing Officer: | | | |
| | | | | |
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03/05/15--01012--015 **25.00



March 31,151

LLC DISS (10) 3/23/15

COVER LETTER

| | gistration Section vision of Corporations | | | | | |
|------------------------|---|--------------------|---|--|--|--|
| SUBJECT: | BWC-3, LLC | | | | | |
| ocoreci. | | ed Liability Compa | ny) | | | |
| The enclose | d Articles of Dissolution and fee(s) are submit | ted for filing | | | | |
| | n all correspondence concerning this matter to | _ | | | | |
| ricase retur | in an correspondence concerning this matter to | the following. | | | | |
| | Bertrand W. Cooper III | | | | | |
| | (Nar | ne of Person) | | | | |
| | BWC-3, LLC | | | | | |
| | (Firm/Company) | | | | | |
| | 12365 Silton Peace Dr. | | | | | |
| | (Address) | | | | | |
| | Riverview, FL 33579 | | | | | |
| | (City/Sta | ate and Zip Code) | | | | |
| For further | information concerning this matter, please call | : | | | | |
| Bertrand W. Cooper III | | 813 at (| 600-1667 | | | |
| | (Name of Person) | | ode & Daytime Telephone Number) | | | |
| Enclosed is a | check for the following amount: | | | | | |
| | | | ng Fee, Certificate of Dissolution & Copy (additional copy is enclosed) | | | |
| | MAILING ADDRESS: | | EET/COURIER ADDRESS: | | | |

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

March 3 2015

| 1. | . The name of a limited liability company is BWC-3, LLC | | | | | |
|-----------|--|--|---------------------------|---|---|------------|
| 2. | The Articles of Organization | on were filed on | 8 | 3/2011 | and assigned | |
| | document number L11000 | | | _ | | |
| 3. | The delayed effective date (effective | the dissolution in a date cannot be price | f not effe or to or mo | ective on the date of re than 90 days later than | filing: March 31, 2015 n date document is received for fi | iling) |
| 4. | A description of occurrence 605.0707, Florida Statutes, | e that resulted in (copy 605.0707 | the limi on back | ted liability compan cover letter). | y's dissolution pursuant to | section |
| | Business is no longer functioning and LLC is no longer needed. | | | | | |
| | | | | | | |
| | | | · · | | | <u> </u> |
| | | . | | | | - 3 |
| | | | | | | 一萬 |
| 5. | If there are no members, en | ter the name and | l address | of the person appoi | inted to wind up the compa | iny's & § |
| | activities and affairs: | Bertrand W. Cooper III | | | | 茎 |
| | | 12365 Silton Peace Dr. | | | | |
| | | Riverview, I | FL 3357 | 79 | | |
| | | | | | | <u> </u> |
| 6. lis | Signature of an authorized ted above to wind up the co | person or if there | e are no | members, the signat fairs: | ure of the person appointed | d and |
| | 110 | | | | | |
| , | 19th Colon | ~C, | | Bertrand W. Co | ooper III | |
| 7 | Signature | | <u> </u> | P | rinted 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: |
|--|
| Document number of Limited Liability Company is: |
| Date of dissolution was: March 31, 2015 |
| Description of information that must be included in a written claim: |
| Date and Time of service that pertains to the claim, and what the claim is for specifically. |
| Any and all personnel who were involved with the claim. As well as what type of |
| business/service was being performed. |
| |
| |
| |
| Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) |
| 12365 Silton Peace Dr |
| Riverview, FL 33579 |
| |
| |
| |
| 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. |
| Λ Λ |
| Bertrand W. Cooper III |
| 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