

L11000143759

VIA

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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MAIL

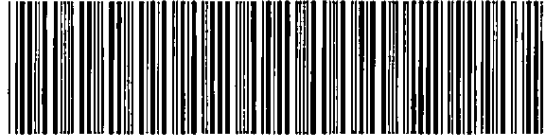
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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01/24/24--01003--003 **25.00

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2024 JAN 24 PM 4:37
SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Labs 2 You, 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:

Michael B. Bittner, Esq.

(Name of Person)

MB Legal, PLLC

(Firm/Company)

9838 Old Baymeadows Road #315

(Address)

Jacksonville, Florida 32256

(City/State and Zip Code)

For further information concerning this matter, please call:

Michael B. Bittner

(Name of Person)

904

608-1289

at ()

(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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is

Labs 2 You, LLC

2. The Articles of Organization were filed on December 13, 2011 and assigned

document number L11000143759

3. The delayed effective date the dissolution is not effective on the date of filing: _____
(effective date cannot be prior to or more than 90 days later than date document is received for filing)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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).

The members unanimously agreed to dissolve the company for business reasons.

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:

6. Signature of an authorized person or if there are no members, the signature of the person appointed and listed above to wind up the company's activities and affairs:

Chris Freedman (Jan 15 2024 10:44 EST)

Signature

Christopher L. Freedman, Manager

Printed Name

FILING FEE: \$25.00

2024 JAN 24 PM 4:37
DEPT. OF STATE
TALLAHASSEE, FL

FILED

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: Labs 2 You, LLC

Document number of Limited Liability Company is: L11000143759

Date of dissolution was: 12/31/23

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

The name and address of the claimant, person, or entity making the claim

The dates and place of the occurrence or transaction that gives rise to the claim

A brief description of the facts and circumstances involved

The amount or value of the claim, and the basis or calculation for determining it.

The evidence or documents that substantiate the claim, such as receipts, invoices, contracts, photos, etc.

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

Labs 2 You, LLC


4237 Salisbury Road, Suite 302

Jacksonville, FL 32216

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.

Christopher L. Freedman, Manager

Printed Name of the Person Filing


Chris Freedman (Jan 15, 2024 10:44:57)

Signature of the Person Filing

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