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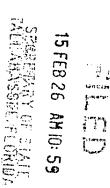
(Requestor's Name)		
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COVER LETTER •

TO: Registration Section

Division of Corporations

B. HARVEY R.E. LLC

SUBJECT:

(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:

Bruce Harvey	
	(Name of Person)
B. HARVEY R.E. LLC	
	(Firm/Company)
8458 S.E. Retreat Drive	
	(Address)
Hobe Sound, FL 33455	
	(City/State and Zip Code)

For further information concerning this matter, please call:

Bruce Harvey 760 271-8374

(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 FOR A LIMITED LIABILITY COMPANY

B. HARVEY R.E. L	- • •	•	
. The Articles of Organi	ization were filed on 01/12/2012	and assigned	
document number L12	2000006119		
. The delayed effective (ef	date the dissolution if not effective on the fective date cannot be prior to or more than 90 days	date of filing: later than date document is received for filing)	
. A description of occur 605.0707, Florida Statu	rence that resulted in the limited liability outes, (copy 605.0707 on back cover letter).	company's dissolution pursuant to section	
Dissolution due to	Members taking retirement.		
		only.	
		15 FEB	
. If there are no member	rs, enter the name and address of the perso	on appointed to wind up the contrary's	
activities and affairs:	Bruce Harvey, 8458 S.E Retr	eat Dr., Hobe Sound, FL 33455	
		10: 59	
		7	
. Signature of an author sted above to wind up the	ized person or if there are no members, the ne company's activities and affairs:	e signature of the person appointed and	
BHAV	£		
4.11	Bruce Ha		
Signa y i	are	Printed Name	

FILING FEE: \$25.00