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(Requestor's Name)		
	·	
(Address)		
(Address)		
(City/Stat	e/Zip/Phone #)	
PICK-UP	WAIT MAIL	
(Business	s Entity Name)	
(Documo)	nt Number)	
(Docume	nt Number)	
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2016 FEB 16 PM 5: 36 STURE HARY OF STAIL IALLAHASSEE, FLORID,

K.SALY EXAMINER FEB 16

COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT

EBF CONCEPT "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:

NANCY C ARAUJO

(Name of Person)

C/O ORION INVESTMENT & MGMT

(Firm/Company)

200 S BISCAYNE BLVD, 6TH FL

(Address)

MIAMI, FL 33131

(City/State and Zip Code)

For further information concerning this matter, please call:

NANCY C. ARAUJO

ູ 305

960-8995

(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

2016 FILED	
CBIC	
ALLAHASSEE, PLORIDA	5
. FLORIDA	

1.	The name of a limited liabil EBF CONCEPT "LLC"	ity company is	FALL AHASSE		
2.	The Articles of Organization	n were filed on	and assigned		
	document number L1200000	9943			
3.	. The delayed effective date the dissolution if 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 listed as the document's effective date on the Department of State's records.				
4.	A description of occurrence 605.0707, Florida Statutes, (NO LONGER NEEDED	ompany's dissolution pursuant to section			
					
5.	If there are no members, en	ter the name and address of the person	appointed to wind up the company's		
	activities and affairs:	EMMANUEL BERLIOZ			
		20976 8TH AVENUE W			
		SUMMERLAND KEY, FL 33042			
6. lis	Signature of an authorized pated above to wind up the cor	npany's activities and affairs:	signature of the person appointed and		
	Signature	<u> </u>	Printed Name		
		FILING FEE: \$25.00			