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(Re	questor's Name)			
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(Cit	y/State/Zip/Phone	#)		
PICK-UP	☐ WAIT	MAIL		
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(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				





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COVER LETTER •

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TO:

Registration Section
Division of Corporations

SUBJECT

TRES BROWN, LLC

The enclosed Articles of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Any Baken (Name of Person)			
(Name of Person)			
(Firm/Company)			
15411 17TH ONE E			
(Address)			
BRADENTON FL 34212			
(City/State and Zip Code)			

For further information concerning this matter, please call:

Any Bearbern at (941) 748-2431 (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

1.	The name of a limited liability company is		
	Tres Beaux, LLC		_•
2.	The Articles of Organization were filed on <u>June 25, 2012</u> and assigned document number <u>L 120000 8 3326</u>		
3.	The delayed effective date the dissolution if not effective on the date of filing: A on 18.7 (effective date cannot be prior to or more than 90 days later than date document is receive Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this listed as the document's effective date on the Department of State's records.	O(6 d for filing date will	g) not be
4.	A description of occurrence that resulted in the limited liability company's dissolution pursua 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).	ant to sec	ction
	Not profitable members mutual Consult	至海	
		12	-6 A :
		<u> 중문</u>	_ _
			8
		<u> </u>	 -
5.	If there are no members, enter the name and address of the person appointed to wind up the cactivities and affairs:	ompany	S S
			-
			_
6. lis	Signature of an authorized person or if there are no members, the signature of the person apposted above to wind up the company's activities and affairs:	ointed ar	nd
ر و_	Le Claubien Amy Reaubien Signature Printed Name		_

FILING FEE: \$25.00