*/ 12000/40/28

RICK H	BAKE	ER
· (Re	questor's Name	()
19695 MARRELL	ENIA CIRC	c <i>l</i> £
(Ad	dress)	
(Ad	dress)	
FORT MYERS	FLORIDA	33967
FORT MYERS (Cit	y/State/Zip/Pho	ne #)
733	1-240-9011	[239-482-8335
PICK-UP	WAIT	MAIL
CAD CALLED	Ac	
CLB SALES &	イジンベッド siness Entity Na	ame)
<u> 37-1706811</u>	Cument Number	0
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Certified Copies	_ Certificate	es of Status
Special Instructions to	Filing Officer:	
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FILED

2015 JUN 30 PM 2: 57

SECRETARY OF STATE

K.SALY EXAMINER JUL -2 2015



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 4, 2015

RICK H BAKER RE: CRB SALES & ASSOCIATES LLC 19695 NADDELENA CIR. FORT MYERS, FL 33967

SUBJECT: CRB SALES & ASSOCIATES LLC

Ref. Number: L12000140128

We have received your document for CRB SALES & ASSOCIATES LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes. The proper form is enclosed for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 715A00009170

Karen A Saly Regulatory Specialist II ARY OF STATE

COVER LETTER

SUBJECT: CRB Sa	ales & Associates LLC (Name of Lin	mited Liability Company)	
The enclosed Articles	of Amendment and fee(s) are sub	bmitted for filing.	
Please return all corres	pondence concerning this matter	r to the following:	
	R	ick H. Baker	
	()	Name of Person)	
	CRB Sale	es & Associates LLC	
	(Firm/Company)	
	19695	Maddelena Circle	
		(Address)	
	······································	yers, Florida 33967	
	(City.	/State and Zip Code)	
For further information	n concerning this matter, please of	call:	
	Rick H. Baker	at 239- 240 9011	
	(Name of Person)	(Area Code & Daytime	Telephone Number)
Enclosed is a check for th	ne following amount:		
■ \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & 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

FILED 2015 JUN 30 PM 2:55

1. The name of a limited li	ability company is	CRB SA	HES ANN I	ASSOCIATES	A () (S) ()
2. The Articles of Organiz	ation were filed on			and assigned	+ © 1₹1
document number 27	-1706811	_#612000,	140128		
3. The delayed effective d (effe Note: If the date inserted listed as the document's of	in this block does no	it meet the applicable	e statutory filing req	APL, L 20 cument is received for uirements, this date	, 2015 filing) will not be
4. A description of occurre 605.0707, Florida Statut	ence that resulted in es, (copy 605.0707	the limited liabili on back cover lett	ty company's diss er).	olution pursuant to	o section
LACK OF BU			,		
					
5. If there are no members		d address of the pe		wind up the comp	any's
activities and affairs:				C 11. C	
		MAJOBELENA			
	239-2	40-901	or 23	9-482-8	335
6. Signature of an authorize the street above to wind up the	ted person or if ther company's activiti	e are no members, es and affairs:	the signature of t	he person appointe	ed and
. 1.			0 "	0 4	
Tuck H 18	eher		KICK M	13AKER	
Signatu	C		rrinted P	Name	

FILING FEE: \$25.00