L12000) / 4/ 482
(Requestor's Name) (Address) (Address)	400329282994
(City/State/Zip/Phone #)	05/17/1901011005 **25.00
Certified Copies Certificates of Status	FILED 19 MAY 17 PH 3: 16 SUME LARY OF STATE FALL MEASSEE FLORIDA
Office Use Only	AIN 0 3 2019 T SCHROEDER

• • • •	COVER LETTER
TO: Registration Section Division of Corporations	
SUBJECT: 1B.USA, LLC	
	of Limited Liability Company
Dear Sir or Madam:	
The enclosed Statement of Termination and	ree(s) are submitted for filing.
Please return all correspondence concerning	this matter to the following:
Stanislav Kashaev	
Name of Person	<u>_</u>
Firm/Company	
1111 LINCOLN ROAD STE 750	
Address	
Miami Beach, FL 33139	
City/State and Zip Code	
E-mail address: (to be used for future annua	Il report notification)
For further information concerning this matte	er, please call:
Name of Person	_ at ()
Name of Person	Area Code Daytime Telephone Number
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section Division of Corporations	Registration Section Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle Tallahassec, Florida 32301	Tallahassee, Florida 32314
CR2E141 (2/14)	

• STATEMENT OF TERMINATION

Pursuant to section 605.0709(7), Florida Statutes, I her FIRST: The name of the limited liability company is:	
SECOND: The Florida Document number of the limi	ed liability company is:
THIRD: The date of filing of the initial articles of org	anization is:
FOURTH: The date of filing of the dissolution is: $\frac{08}{2}$	/30/2018
FIFTH: This limited liability company has completed that it will file a statement of termination.	winding up its activities and affairs and has determined
	v Kashaev
Filing Fi	ce: \$25.00 \$30.00 (optional)
CR2E141 (2/14)	ILED SPECTSTATE SPECTSTATE FLORIDA