

L13000026856

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

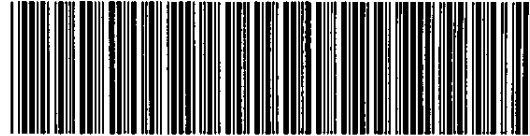
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

wrong form

Office Use Only



800271440648

04/06/15--01048--010 **43.75

FILED
15 APR 27 PM 1:31
STATE OF TEXAS
FALLS CHURCH, TEXAS

dissolution

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DISSOLUTION OF CORPORATION

DOCUMENT NUMBER: L13000026856

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

VINCENT M. IMHOFF

(Name of Contact Person)

IMHOFF & ASSOCIATES, P.C.

(Firm/Company)

12424 WILSHIRE BLVD., SUITE 770

(Address)

LOS ANGELES, CA 90025

(City/State and Zip Code)

For further information concerning this matter, please call:

MORRIS BORNSTEIN at **(727) 397-9955**

(Name of Contact Person)

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☐ \$35 Filing Fee ☒ \$43.75 Filing Fee & Certificate of Status ☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) ☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)

MAILING ADDRESS:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

FILED
15 MAR 27 PM 1:01
TALLAHASSEE, FL



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 9, 2015

VINCENT M IMHOFF
IMHOFF & ASSOCIATES, P.C.
12424 WILSHIRE BLVD., SUITE 770
LOS ANGELES, CA 90025

SUBJECT: IMHB, LLC
Ref. Number: L13000026856

We have received your document for IMHB, LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Corporation, but your entity is a Limited Liability Company. Please complete and return the enclosed blank form(s).

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) 245-6050.

Diane Cushing
Senior Section Administrator

Letter Number: 215A00007108

RECEIVED
15 APR 27 PM 3:23
FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

**ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is

IMHB, LLC

2. The Articles of Organization were filed on 2. 20. 13 and assigned

document number L13000026856

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)

4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).

the llc has not commenced business

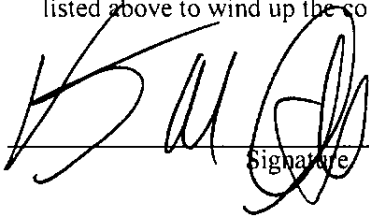
5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:

VINCE IMHOFF

12424 WILSHIRE BLVD #770

LA CA 90025

6. Signature of an authorized person or if there are no members, the signature of the person appointed and listed above to wind up the company's activities and affairs:



Signature

VINCE IMHOFF

Printed Name

FILING FEE: \$25.00

SECRET
TALLAHASSEE

15 APR 27 PM 1:31

FILED

Notice of Limited Liability Company Dissolution

NOTE: This page is optional

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company: IMHB, LLC

Document number of Limited Liability Company is: L13000026856

Date of dissolution was: 4.2.15

Description of information that must be included in a written claim:

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)


VINCENT IMHOFF
12424 WILSHIRE BLVD
SUITE 770
LA CA 90025

FILED
15 APR 27 PM 1:21
SECURITY
TALLAHASSEE, FL

A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

VINCENT IMHOFF

Printed Name of the Person Filing


Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00