

13000010844

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

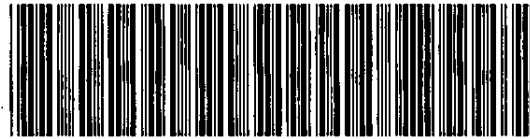
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



300257679863

03/12/14--01005--025 \*\*25.00

FILED  
2014 MAR 12 PM 5:39  
CLERK OF STATE  
TALLAHASSEE FLORIDA

MAR 13 2014

D. B. 1173

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** BH Orangevale Holdings 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:

Aramis Hernandez

(Name of Person)

Downtown Miami Legal

(Firm/Company)

139 NE 1st St

(Address)

Miami, FL 33132

(City/State and Zip Code)

FILED  
2014 MAR 12 PM 5:39  
CLERK OF STATE  
TALLAHASSEE FLORIDA

For further information concerning this matter, please call:

Aramis Hernandez

(Name of Person)

305

3747744

at (

) (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

BH Orangevale Holdings LLC

2. The Articles of Organization were filed on 4/25/2013 and assigned

document number L13000060844

3. The delayed effective date the dissolution is 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).

Voluntary Closure of 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: Leo Kanell

17 Birchtree Ln

Sandy, UT 84092

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

Leo Kanell

Printed Name

**FILING FEE: \$25.00**

**FILED**  
2014 APR 12 PM 5:39  
CLERK OF STATE  
TALLAHASSEE, FLORIDA