L13000166660

(Re	questor's Name)	
(Address)		
(Add	dress)	
(City	y/State/Zip/Phone	±1)
(01.	protector Elpri Hone	,
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies Certificates of Status		
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Special Instructions to I	Filing Officer:	

Office Use Only



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COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT

Bean Team Network 2 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:

Charles H Musgrove, Jr.		
(Name of Person)		
(Firm/Company)		
2001 Thomasville Road		
(Address)		
Tallahassee, Fl 32308		

(City/State and Zip Code)

For further information concerning this matter, please call:

Charles H Musgrove, Jr. at (850 893-7710

(Name of Person)

(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

3. 1 4. <i>A</i>	The name of a limited liability company is Bean Team Network 2 LLC	
3. 1 4. 4	The Articles of Organization were filed on Dec	cember 2, 2013 and assigned
4. <i>A</i>	document number L13000166660	
6	The delayed effective date the dissolution if no (effective date cannot be prior to Note: If the date inserted in this block does not me listed as the document's effective date on the Department.	ot effective on the date of filing: April 1, 2016 or more than 90 days later than date document is received for filing) eet the applicable statutory filing requirements, this date will not be artment of State's records.
<u>I</u> 	A description of occurrence that resulted in the 605.0707, Florida Statutes, (copy 605.0707 on	e limited liability company's dissolution pursuant to section back cover letter).
	Loss of workers' compensation insurance policy and	d loss of all clients.
_		
		ddress of the person appointed to wind up the company's
8	activities and affairs:	
		<u> </u>
		9.
6. S liste	Signature of an authorized person or if there are above to wind up the company's activities a	re no members, the signature of the person appointed and and affairs:
de	BRMuph . Many	Charles H Musgrove, Jr. , Marey Printed Name

FILING FEE: \$25.00

Notice of Limited Liability Company Dissolution

NOTE: This page is optional

Charles H Musgrove, Jr.

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: Bean Team Network 2 LLC
Document number of Limited Liability Company is: L1300016660
Date of dissolution was: April 1, 2016
Description of information that must be included in a written claim:
5
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
Bean Team Network 2 LLC
2001 Thomasville Road
Tallahassee, Fl 32308
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.

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