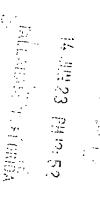
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Office Use Only



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06/23/14--01028--013 **25.00



COVER LETTER

_	ion of Corporations					
BayRoot Bay Cafe 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:						
	Sam Badawi					
(Name of Person)						
BayRoot Bay Cafe LLC						
	(Firm/Company)					
	10907 Cory Lake Drive					
	(Address)					
	Tampa, FL 33647					
(City/State and Zip Code)						
For further information concerning this matter, please call:						
Sam Badawi		813	508-8808			
	(Name of Person)		ode & Daytime Telephone Number)			
Enclosed is a ch	eck 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:		EET/COURIER ADDRESS:			
Registration Section Division of Corporations P.O. Box 6327		Registration Section Division of Corporations				
		Clifton Building				
	Tallahassee, FL 32314		Executive Center Circle ahassee, FL 32301			

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liability company is						
	BayRoot Bay Cafe			<u>,</u>			
2.	The Articles of Organization	on were filed on 02/05/20)14	and assigned			
	document number L14000	0019676	-				
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).						
	Consent by all members to dissolve the limited liability company.						
5.	If there are no members, enter the name and address of the person appointed to wind up the company's						
activities and affairs: Sam Badawi							
		10907 Cory Lake Di	rive				
		Tampa, FL 33647					
6.	Signature of an authorized	person or if there are no m	embers, the signature of t	he person appointed and			
lis	ted above to wind up the co	mpany's activities and affa	airs:				
			_	12			
,			Sam Bu	low!			
	Signature		Printed N	Name , Ji			

FILING FEE: \$25.00