# 14000006474

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Dusiness Littly Warne)
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#### **COVER LETTER**

TO:

Registration Section

**Division of Corporations** 

SUBJECT:

## IRB ENTERPRISE 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:

#### DONNA ROBBINS

(Name of Person)

#### **BUSINESS SERVICE SYSTEMS PA**

(Firm/Company)

### 6600 4TH STREET N, 101

(Address)

# ST PETERSBURG, FL 33702

(City/State and Zip Code)

For further information concerning this matter, please call:

DONNA ROBBINS

\_,727

520-8652

(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

1. The name of a limited lial	bility company is			
IRB E	ENTERPRISE LLC			<del></del> .
2. The Articles of Organizat	ion were filed on _	04/23/14	and assigned	
document numberL1400	0066474			
	ive date cannot be prior in this block does not	r to or more than 90 days late meet the applicable statut	r than date document is received ory filing requirements, this o	for filing)
4. A description of occurren 605.0707, Florida Statutes	ice that resulted in 1	the limited liability com	npany's dissolution pursua	nt to section
Closed bu				
CIUSED ON	SINCOS			
<del> </del>		· • <del> </del>		
5. If there are no members, e	antar the name and	addragg of the person o	anointed to wind up the ac	
	enter the hame and NAZIH TAGEI		ppointed to wind up the co	w
activities and affairs:				
	2816 BRANCH	CREEK AVENUE		ਿਲ 80 ਵਿ
				0F 00  F08A  10HS
	CLEARWATE	R, FL 33760		<u> </u>
				57
<ol><li>Signature of an authorized listed above to wind up the c</li></ol>	d person or if there	are no members, the sign	gnature of the person appo	inted and
above to mind up the e	ompany a activition	o min milmild.		
Hag		<u> </u>	IAZIH TAGEDDINE	
Signature			Printed Name	

FILING FEE: \$25.00