# L14000 157627

(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
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J. Shivers NOV 0 4 2014

#### **COVER LETTER**

TO:	Registration Section Division of Corporations
SUBJI	HB 2137 LLC
	(Name of Limited Liability Company)
The em	should Aminho of Disabluting and for (A) are achoring 1 for Client
THE CI	closed Articles of Dissolution and fee(s) are submitted for filing.
Please	return all correspondence concerning this matter to the following:
	(Name of Person)
	(Name of Person)
	(Firm/Company)
	·
	785 CRANDON SLID # 201 (Address)
	(Address)
	City/State and Zin Code)
	(City/State and Zip Code)
For fur	ther information concerning this matter, please call:
	GUSTAVO GAMBINO at ( )86 281 - 5050 (Area Code & Daytime Telephone Number)
	(Name of Person) (Area Code & Daytime Telephone Number)
Enclose	d is a check for the following amount:
(de	\$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

The name of a limited liability con	mpany is HB 2131 LLC
2. The Articles of Organization were	e filed on $\frac{10/9/2014}{}$ and assigned
document number <u>L</u> 144	bbb 157627
3. The delayed effective date the diss (effective date car	solution if not effective on the date of filing:
4. A description of occurrence that re 605.0707, Florida Statutes, (copy 6	esulted in the limited liability company's dissolution pursuant to section 605.0707 on back cover letter).  Thus Plany
TO PURCHICIS U	NOON THIS NOW LLC WAS NOT
ACOVIRGO AND	LIC HOS MO PURPOSE NOW.
5. If there are no members, enter the activities and affairs:	name and address of the person appointed to wind up the company's
	785 CROON BLID # 201
	koy BISCAYNO , FL 33149
	A SET T
6. Signature of an authorized person listed above to wind up the company'	or if there are no members, the signature of the person appointed and sactivities and affairs:
Simple	C GIMBINES IN ST
Signature -	Printed Name