

L14000168045

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

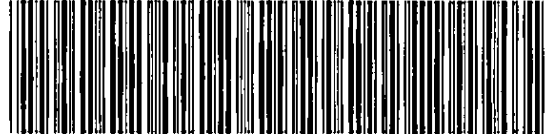
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



100320301801

11/02/18--01011--010 \*\*25.00

18 NOV -2 PM 3:31  
RECEIVED  
STATE OF NEW YORK  
DEPT. OF TAXATION & FINANCE

*Dissolution  
with notice*

NOV 13 2018

D CUSHING

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** PB VIKINGS, 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:

JOSHUA D LYONS

(Name of Person)

(Firm/Company)

923 MILL CREEK DRIVE

(Address)

PALM BEACH GARDENS, FL 33410

(City/State and Zip Code)

For further information concerning this matter, please call:

JOSHUA D LYONS

(Name of Person)

at (

561

846-2491

(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

FILED  
JUN 2 1994  
TALLAHASSEE, FL

**ARTICLES OF DISSOLUTION  
FOR  
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is  
PB VIKINGS LLC

2. The Articles of Organization were filed on 10/28/2014 and assigned  
document number L14000168045

3. The delayed effective date the dissolution if not effective on the date of filing: 10/31/2018  
(effective date cannot be prior to or more than 90 days later than date document is received for filing)  
**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be  
listed as the document's effective date on the Department of State's records.

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).  
THE LIMITED LIABILITY COMPANY WAS NO LONGER ECONOMICALLY VIABLE.

5. If there are no members, enter the name and address of the person appointed to wind up the company's  
activities and affairs: \_\_\_\_\_

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

JOSHUA D LYONS  
Printed Name

**FILING FEE: \$25.00**

FILED  
IN THE  
CLERK OF STATE  
OFFICE  
TALLAHASSEE  
FLORIDA  
NOV - 2 PM 3:34

## Notice of Limited Liability Company Dissolution

**NOTE: This page is optional**

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: PB VIKINGS LLC

Document number of Limited Liability Company is: L14000168045

Date of dissolution was: 10/31/2018

Description of information that must be included in a written claim:

NAME OF CLAIMANT

CONTACT INFORMATION OF CLAIMANT (ADDRESS, PHONE NUMBER, FAX, & EMAIL ADDRESS)

CONTACT INFORMATION OF CLAIMANT'S ATTORNEY

DESCRIPTION OF CLAIM

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

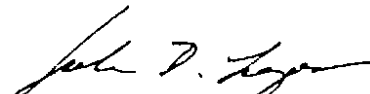
923 MILL CREEK DRIVE

PALM BEACH GARDENS, FL 33410

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.

JOSHUA D LYONS

Printed Name of the Person Filing



Signature of the Person Filing

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

NOV 2 2018 PM 3:31  
DIVISION OF CORPORATIONS  
STATE OF FLORIDA