# 4500034063

(Re	equestor's Name)	)			
(Ad	dress)				
(Ad	ldress)				
(City/State/Zip/Phone #)					
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	_ Certificate	es of Status			
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TALLAHASSEE, FLORIDA

MAY 03 2016 S. YOUNG

### **COVER LETTER**

TO: Registration Section

Division of Corporations

SUBJECT

**B&B Strategies, 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:

**Brent Fernandez** 

(Name of Person)

**B&B** Strategies, LLC

(Firm/Company)

4618 W El Prado Blvd.

(Address)

Tampa, FL 33629

(City/State and Zip Code)

For further information concerning this matter, please call:

**Brent Fernandez** 

\_,813 ..

389-2379

(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 liability company is					
	B&B Strategies, LLC					
2.	The Articles of Organization we	re filed on 2/24/2015		and assigned		
	document number L15000034063	3				
3.	The delayed effective date the d (effective date  Note: If the date inserted in this b listed as the document's effective of	cannot be prior to or more tha lock does not meet the appl	n 90 days later than de icable statutory filin	ite document is received for		
4.	A description of occurrence that 605.0707, Florida Statutes, (copy	resulted in the limited live 605.0707 on back cove	ability company's r letter).	dissolution pursuant		
	Never established any business activ		•		MAN	
					-2	
			******			
					<b>P</b>	
					<u></u>	
5.	If there are no members, enter the activities and affairs:	ne name and address of the	ne person appointe	ed to wind up the com	pany's	
6. lis	Signature of an authorized personated above to wind up the compan	on or if there are no mem	bers, the signature	e of the person appoin	ted and	
		≦ Br	ent Fernandez			
	Signature		Prin	ted Name		

FILING FEE: \$25.00