

L15000085779

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(Address)

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(Business Entity Name)

(Document Number)

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900278586479

EFFECTIVE DATE
12-15-2015

11/16/15--01018--028 **25.00

FILED
2015 NOV 16 PM 12:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
EXAMINER
NOV 19 2015

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LEND A HAND BOCA, 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:

JOE BARBERA

(Name of Person)

LEND A HAND BOCA, LLC

(Firm/Company)

4 ROYAL PALM WAY #307

(Address)

BOCA RATON, FL 33432

(City/State and Zip Code)

For further information concerning this matter, please call:

JOE BARBERA

(Name of Person)

at

(239) 249 9848

(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

EFFECTIVE DATE
12-15-2015

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is

LEND A HAND BOCA, LLC

2. The Articles of Organization were filed on MAY 14 2015 and assigned

document number L 150000 85779

3. The delayed effective date the dissolution if not effective on the date of filing: 12/15/2015
(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).

THERE WAS NOT ENOUGH
BUSINESS TO SUSTAIN 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:

JOE BARBERA

4 ROYAL PALM WAY #307

BOCA RATON, FL 33432

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

JOSEPH BARBERA

Printed Name

FILING FEE: \$25.00