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	(Requestor's Name)	
	(Address)	
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	(City/State/Zip/Phone #)	
PICK-U	P WAIT	MAIL.
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	(Business Entity Name)	
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	(Document Number)	
Certified Copies	Certificates of S	Status
Special Instruction	s to Filing Officer:	
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February 22, 2016

REBECCA L. BICE 3264 GOLFVIEW ROAD SEBRING, FL 33875

SUBJECT: SLICE OF BICE, LLC Ref. Number: L15000129688

We have received your document for SLICE OF BICE, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION - INC, but your entity is a LIMITED LIABILITY COMPANY - LLC. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 816A00003655

Stacey M Mason Regulatory Specialist II

www.sunbiz.org

COVER LETTER

Registration Section
Division of Corporations

Tallahassee, Florida 32301

CR2E079 (2/14)

TO:

SUBJECT: SLICE OF BICE	LLC
(Name of Limited Liability Company)	
The enclosed member, resignation or dissociation and fee(s) are su	bmitted for filing.
Please return all correspondence concerning this matter to:	
Rebecca LBice (Contact Person)	
SLICE OF BICE LIC (Firm/Company)	
3264 Golfvier Ross	
Sesning FL 33875 (City/State and Zip Code)	
For further information concerning this matter, please call:	
	リスパワワo ime Telephone Number)
Enclosed please find a check made payable to the Florida Departm ☐ \$25 Filing Fee ☐ \$55 Filing Fee &	
Registration SectionRegistDivision of CorporationsDivisionClifton BuildingP.O. B	ING ADDRESS: ration Section on of Corporations lox 6327 assee, Florida 32314

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

. The name of a limited lia				
SLILE 0	FBIC	E LLC		·
2. The Articles of Organiza	ition were filed on 7	29/2015	and assigned	
document number				
	te the dissolution if not e tive date cannot be prior to or in this block does not meet ffective date on the Departn	the applicable statutory	f filing: 2/17) an date document is received filing requirements, this da	tor filing) ate will not b
A description of occurre 605.0707, Florida Statute	s, (copy 605.0707 on ba	mited liability compa ck cover letter).	VI.	t to section
No offer	_ to se	U Pro	duct	
5. If there are no members, activities and affairs:	Re Decca	L BILE		npany's
	5264 6	out Vier		
	Sess RIN	6 Ja	33875	
5. Signature of an authorize isted above to wind up the	ed person or if there are i	no members, the signa affairs:	ture of the person appoi	mted and
L Slognature	· •	Reber	era LBIC Printed Name	E_
	FILING	G FEE: \$25.00	2016 NAR SECRETA	
			-2 A NRY OF SSEFIF	

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: SLICE OF BICE LLC Document number of Limited Liability Company is: L15000 129688	<u></u>
Document number of Limited Liability Company is: <u>L15000 129688</u>	
Date of dissolution was: 2117)16	
Description of information that must be included in a written claim:	
None"	
	7-0-1-1
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—————————————————————————————————————	m
ORI II	
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)	
3264 Goltview ROAD Senning R 33875	
Senning R 33875	
· · · · · · · · · · · · · · · · · · ·	

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

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.