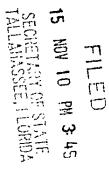
(Requestor's Name)
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NOV 12 2015 S. YOUNG

## **COVER LETTER**

TO:

Registration Section Division of Corporations

SUBJECT:

**B & A XPRESS 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:

# ALBA E VIVAR

(Name of Person)

## MIAMI DISPATCH AND CARRIER SERVICES

(Firm/Company)

8040 NW 95TH ST SUITE#106

(Address)

HIALEAH GARDENS, FL 33016

(City/State and Zip Code)

For further information concerning this matter, please call:

ALBA E VIVAR

<sub>4</sub>,305

3220255

(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 & A XPRESS LLC
2.	The Articles of Organization were filed on and assigned and assigned
	document number L15000162127
3.	The delayed effective date the dissolution if not effective on the date of filing:  (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).
	SECT
5.	If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:
	STATE STATE
6. lis	Signature of an authorized person or if there are no members, the signature of the person appointed and ted above to wind up the company's activities and affairs:
<u></u>	JORGE E BETANCOURT
11	Signature Printed Name

FILING FEE: \$25.00