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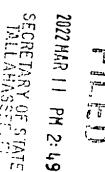
(Requestor's Name)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
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Certified Copies Certificates of Status				
Control of the Contro				
Special Instructions to Filing Officer:				
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Office Use Only



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COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT:	Bryan & Long Construction LLC				
MODJECT.	(Name of Linus	ed Liability Comp	any)		
The enclosed	I Articles of Dissolution and fee(s) are submit	tted for filing.			
Please return	all correspondence concerning this matter to	the following:			
	Steven K Bryan				
	(Nat	me of Person)			
	Bryan & Long Construction LLC				
	(Firm/Company)				
	PO BOX 2512				
		(Address)			
	Havana, Fl 32333				
	(City/Sta	ate and Zip Code)			
For further i	nformation concerning this matter, please call	:			
Ste	ven K BRyan	850 at (508-6451		
	(Name of Person)	at () (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:		Street Addre			
Registration Section Division of Corporations		Registration Section Division of Corporations			
P.O. Box 6327		The Centre of Tallahassee			
Tallahassee. FL 32314		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

FILED 2022 HAR II PM 2: 49

1. The name of a limited liability company is

Bryan & Long Construction LEC

SECRETARY OF STATE
TALLAHASSEE, FL

			"TOP WITH OSEE, FE			
2.	The Articles of Organization were filed on 10/	/20/2015				
	document number L15000178154					
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 b listed as the document's effective date on the Department of State's records.					
4.	A description of occurrence that resulted in the 605.0707, Florida Statutes, (copy 605.0707 on Closed business	e limited liability compar back cover letter).	ny's dissolution pursuant to section			
	Closed business		<u>. </u>			
	Closed business					
	Closed business					
5.	If there are no members, enter the name and acativities and affairs:	ddress of the person appo				
6. ab	Signature of an authorized person or if there a ove to wind up the company's activities and af	re no members, the signa fairs:	iture of the person appointed and listed			
	A+ 11.11					
	m K K	Steven K Bryan				
_	Signature		Printed Name			

FILING FEE: \$25.00