

L16000041184

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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FILED
SECRETARY OF STATE
IN RECEPTION

MAR 15 2017
J. HARRIS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BF FLIGHT 2 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:

JAMES GONZALEZ

(Name of Person)

AT PLUS CORP

(Firm/Company)

3650 NW 82ND AVE SUITE 404

(Address)

DORAL, FL 33166

(City/State and Zip Code)

For further information concerning this matter, please call:

JAMES GONZALEZ

(Name of Person)

at (305) 4063800

(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

BF FLIGHT 2 LLC

2. The Articles of Organization were filed on 2/26/2016 and assigned

document number L16000041184

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).

NO BUSINESS

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:

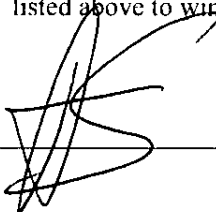
AGUSTIN SANTIAGO

245 SE 1ST ST

SUITE 229

MIAMI, FL 33131

6. Signature of an authorized person or if there are no members, the signature of the person appointed as listed above to wind up the company's activities and affairs:



Signature

AGUSTIN SANTIAGO

Printed Name

FILING FEE: \$25.00

7 MAR 14 PM 2:50

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS