

L16000044769

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

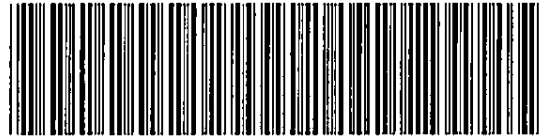
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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Office Use Only



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2023 FEB 22 AM 10:00

STATE ARCH OF STATE  
TALLAHASSEE, FL

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** LMB PAINTING 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:

JULISSA ROSADO

(Name of Person)

DCM SERVICES CENTER INC

(Firm/Company)

10030 STATE RD 52

(Address)

HUDSON FLORIDA 34669

(City/State and Zip Code)

For further information concerning this matter, please call:

JULISSA ROSADO

(Name of Person)

813

9908630

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:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

OFFICE OF THE  
CLERK OF THE  
TALLAHASSEE, FL

2023 FEB 22 AM 10:00

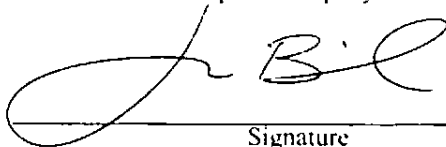
FILED

**ARTICLES OF DISSOLUTION  
FOR  
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is  
LMB PAINTING LLC
2. The Articles of Organization were filed on 03/07/2016 and assigned  
document number L16000046769
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 LONGER IN OPERATION -

5. If there are no members, enter the name and address of the person appointed to wind up the company's  
activities and affairs: LUIS BIDO  
9841 WARM STONE ST  
THONOTOSASSA, FLORIDA 33592

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

LUIS BIDO

Printed Name

**FILING FEE: \$25.00**

2023 FEB 22 AM 10:00  
SECRETARY OF STATE  
TALLAHASSEE FL

FILED

## 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: LMB PAINTING LLC

Document number of Limited Liability Company is: L16000046769

Date of dissolution was: \_\_\_\_\_

Description of information that must be included in a written claim:

NATURE OF CLAIM, CONTACT INFORMATION

2023 FEB 22 AM 10:00	SECRETARY OF STATE TALLAHASSEE, FL

FILED

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

LMB PAINTING LLC


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.

LUIS BIDO

Printed Name of the Person Filing



Signature of the Person Filing

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