

# L16000209429

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



000408009630

CLERK OF COURT  
TALLAHASSEE, FLORIDA

2023 MAY -8 AM 10:43

FILED

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: TC BRIDGE BLVD, LLC  
\_\_\_\_\_  
(Name of Limited Liability Company)

### Notice of Dissolution

The enclosed ~~Articles of Dissolution~~ and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Christopher C. Campione, Esq.

\_\_\_\_\_  
(Name of Person)

Campione, Campione & Leonard, P.A.

\_\_\_\_\_  
(Firm/Company)

4445 Hwy A1A, Suite 110

\_\_\_\_\_  
(Address)

Vero Beach, FL 32963

\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

Christopher C. Campione, Esq.

\_\_\_\_\_  
(Name of Person)

at ( 772 ) 978-9582

\_\_\_\_\_  
(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

## 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: TC BRIDGE BLVD, LLC

Document number of Limited Liability Company is: L16000209429

Date of dissolution was: April 1, 2023

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

Name and address of person or entity making claim, sufficient for service of process

Detailed description of services or materials which form the basis for the claim

Date of service or delivery of products or services which form the basis for claim of amounts owed

FILED  
2023 MAY -8 AM 10:43  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

Michael Barbosa

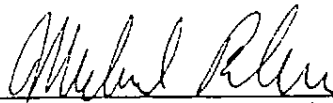
3001 Ocean Drive, Suite 203

Vero Beach, FL 32963

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.

Michael Barbosa

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**