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(Cit	y/State/Zip/Phone	e #)
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Certified Copies	Certificates	s of Status
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Special Instructions to	Filing Officer:	
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Office Use Only



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SECRETARY OF STATE
ALL AHASSEF FLORIDA

K. SALY FEB 22 2018

## **COVER LETTER**

TO: Registration Section
Division of Corporations

SUBJECT: BCAK, 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:

Donna Duncan, Attorney

(Name of Person)

Sanders and Duncan, P.A.

(Firm/Company)

P.O. Box 157

(Address)

Apalachicola, FL 32329

(City/State and Zip Code)

For further information concerning this matter, please call:

**Donna Duncan** 

<sub>4</sub>,850

653-8976

(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)

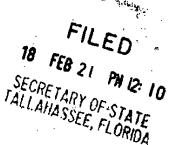
### **MAILING ADDRESS:**

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

## STREET/COURIER ADDRESS:

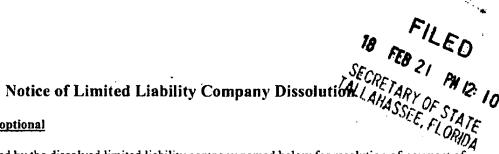
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

# ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY



1.	The name of a limited liability company is BCAK, LLC		LAHASSEE, FLORIDA
2.	The Articles of Organization were filed on	12/27/2016	and assigned
	document number <u>L16000232461</u>	···	
3.	The delayed effective date the dissolution (effective date cannot be pri Note: If the date inserted in this block does no listed as the document's effective date on the l	ior to or more than 90 days to ot meet the applicable sta	later than date document is received for filing) stutory filing requirements, this date will not be
4.	A description of occurrence that resulted in 605.0707, Florida Statutes, (copy 605.0707	n the limited liability co on back cover letter).	ompany's dissolution pursuant to section
	Sell and transfer of ownership of LLC real prop	perty	
5.	If there are no members, enter the name an	nd address of the person	appointed to wind up the company's
	activities and affairs:		
6. lis	Signature of an authorized person or if the ted above to wind up the company's activit	re are no members, the ies and affairs:	signature of the person appointed and
F	Sictif	Brian Craig	Robinson, Co-Trustee of The BCR Trust
	Signature		Printed Name

FILING FEE: \$25.00



### 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: BCAK, LLC	
Document number of Limited Liability Company is: L16000232461	····
Date of dissolution was: 02/03/2018	
Description of information that must be included in a written claim:	
Complete statement of claim	
Contact information for claimant	
Documentation supporting statement of claim	
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corp	porations)
The BCR Trust dated February 25, 2014	
59221 East 288th Lane	<del>-</del>
	<del>-</del>
Grove, OK 74344	

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.

Brian Craig Robinson, Co-Trustee

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