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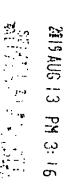
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(City	y/State/Zip/Phone	e #)
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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: LB3 Group LLC	
	of Limited Liability Company
Dear Sir or Madam:	
The enclosed Statement of Termination and	fee(s) are submitted for filing.
Please return all correspondence concerning	this matter to the following:
Lior Bendat	
Name of Person	
Firm/Company	
3692 Historic Lane	
Address	
West Palm Beach, FL 33405	
City/State and Zip Code	
liorbendat@gmail.com	
E-mail address: (to be used for future annua	al report notification)
For further information concerning this matte	er, please call:
Lior Bendat	at () 344-5390
Name of Person	Area Code Daytime Telephone Number
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section Registration Section	
Division of Corporations Clifton Building	Division of Corporations P.O. Box 6327
2661 Executive Center Circle	Tallahassee, Florida 32314
Tallahassee. Florida 32301	

CR2E141 (2/14)

STATEMENT OF TERMINATION

	atutes, I hereby submit the following Stateme	nt of Termin	nation:
FIRST: The name of the limited liability c	ompany is:		
SECOND: The Florida Document number	of the limited liability company is: L17000	067772 ————	
THIRD: The date of filing of the initial art	icles of organization is: 03/24/2017		
FOURTH: The date of filing of the dissolu	ution is: 07/27/19		_·
FIFTH: This limited liability company has that it will file a statement of termination.	s completed winding up its activities and affa	irs and has d	letermined
And A	Lior Bendat	SELLA EALLA EALLA	N 31 EC
Signature of Authorized Representative	Typed or printed name of signature	· · · · · ·	ME AIR 13 PH
	Filing Fee: \$25.00	Ş	<u>ω</u> 💭
Cert	ified Copy: \$30.00 (optional)	6-4	~

CR2E141 (2/14)