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COVER LETTER

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SUBJECT:	IBAH, LLC							
(Name of Limited Liability Company)								
	DAVID H. SALMON							
	(Name of Limited Liability Company) Inclosed Articles of Dissolution and fee(s) are submitted for filing. Inclosed Articles of Dissolution and fee(s) are submitted for filing. Inclosed Articles of Dissolution and fee(s) are submitted for filing. Inclosed Articles of Dissolution and fee(s) are submitted for filing. Inclosed Articles of Dissolution (Name of Person) SALMON LEGAL GROUP, P.L. (Firm/Company) 1395 BRICKELL AVENUE, SUITE 800 (Address) MIAM1, FL 33131 (City/State and Zip Code) Inclosed Articles of Dissolution (Address) At (Address) DAVID H. SALMON (Name of Person) (Address) (Area Code & Daytime Telephone Number) E \$25.00 Filing Fee and Certificate of Dissolution & Certified Copy (additional copy is enclosed) Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassec. FL 32314 2415 N. Montroe Street, Suite 810							
	(Name of Limited Liability Company) ticles of Dissolution and fee(s) are submitted for filing. correspondence concerning this matter to the following: DAVID H. SALMON (Name of Person) SALMON LEGAL GROUP, P.L (Firm/Company) 1395 BRICKELL AVENUE, SUITE 800 (Address) MIAMI, FL 33131 (City/State and Zip Code) mation concerning this matter, please call: D.H. SALMON (Name of Person) (Name of Person) (Address) MIAMI, FL 33131 (City/State and Zip Code) (Name of Person) (Area Code & Daytime Telephone Number) k for the following amount: "liting Fee and Certificate of Dissolution Certified Copy (additional copy is enclosed) LAddress: Registration Section Division of Corporations on 6327 The Centre of Tallahassee assec, FL 32314 2415 N. Monroe Street, Suite 810							
	Division of Corporations HBAH, LLC (Name of Limited Liability Company) Dosed Articles of Dissolution and fee(s) are submitted for filing. turn all correspondence concerning this matter to the following: DAVID H. SALMON (Name of Person) SALMON LEGAL GROUP, P.L. (Firm/Company) 1395 BRICKELL AVENUE, SUITE 800 (Address) MIAMI, FL 33131 (City/State and Zip Code) er information concerning this matter, please call: DAVID H. SALMON (Name of Person) (Name of Person) (Name of Person) (Name of Person) (Sa check for the following amount: S25.00 Filing Fee and Certificate of Dissolution (Dissolution & Certificate Copy (additional copy is enclosed)) Mailing Address: Registration Section Division of Corporations Division of Corporations Division of Corporations Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810							
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MIAMI, FL 33131								
(City/State and Zip Code)								
For further info	HBAH, LLC (Name of Limited Liability Company) sed Articles of Dissolution and fee(s) are submitted for filing. arm all correspondence concerning this matter to the following: DAVID H, SALMON (Name of Person) SALMON LEGAL GROUP, P.L. (Firm/Company) 1395 BRICKELL AVENUE, SUITE 800 (Address) MIAMI, FL 33131 (City/State and Zip Code) r information concerning this matter, please call: DAVID H, SALMON (Name of Person) (Name of Person) (Area Code & Daytime Telephone Number) a check for the following amount: 25.00 Filing Fee and Certificate of Dissolution Certified Copy (additional copy is enclosed) Italiling Address: Registration Section Division of Corporations The Centre of Tallahassee							
DAV	ID H. SALMON		508-2020					
	(Name of Person)		& Daytime Telephone Number)					
Enclosed is a che	ck for the following amount:							
■ \$25.00 Filing Fee and Certificate of Dissolution								
Regis Divis P.O.	stration Section ion of Corporations Box 6327	Registration Se Division of Co The Centre of 2415 N. Monro	rporations Tallahassee pe Street, Suite 810					

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liabil HBAH, LLC	ity company is				_•			
2.	The Articles of Organization	n were filed on	03/27/2017	and a	ssigned				
	document number 1.170000	69394							
3.	(effective Note: If the date inserted in t	date the dissolution if not effective on the date of filing:							
4.	A description of occurrence 605.0707, Florida Statutes, (no longer in use	that resulted in copy 605.0707	the limited liability cor on back cover letter).	mpany's dissolutio	on pursuant to sect	ion			
					-	_			
						_			
						_			
5.	If there are no members, ent activities and affairs:		l address of the person GAL GROUP, P.L.	appointed to wind	up the company's	,			
		1395 BRICKELL AVE. STE. 800 MIAMI. FL 33131							
						_			
6. ab	Signature of an authorized pove to wind up the company		e are no members, the s affairs:		· · · · · · · · · · · · · · · · · · ·	j ∰listed ≺ t p			
	Brian H. Bernst Signature	tein	BRIAN H. B	•					
	Signature			Printed Name	; .	⊋			
		F	ILING FEE: \$25.00			Ji Ji			