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To:

bivision of Corporations

Fax Number

(850)617-6383

From:

: MORAN KIDD LYONS JOHNSON, P.A.

Account Name : MORAN KIDD LY Account Number : 120000000003 Phone : (407)841-4141 Fax Number : (407)841-4148

LLC DISSOLUTION OR WITHDRAWAL B & E SPA SERVICES, LLC

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## **COVER LETTER**

TO:	Registration Section Division of Corporations	
SUBJE	B & E Sps Services, LLC	
00.00		ed Liability Company)
	closed Articles of Dissolution and fee(s) are submit	
Picase i	return all correspondence concerning this matter to	the following:
	Scott E. Johnson, Esq.	
	(Nan	is of Parson)
	Moran Kidd Lyons Johnson Garcia, PA	
	(Fin	п/Сопъяпу)
	111 N. Orange Avenue, Suite 900	
		A(ldrcas)
	Orlando, Florida 32801	
	(City/Sta	te and Zip Code)
For fur	ther information concerning this matter, please call:	
	Scott E. Johnson	407 841-4141 at ( )
	(Namo of Person)	(Area Code & Daylime Telephone Number)
Enclose	d is a check for the following amount:	
E	\$25.00 Filing Pee and Certificate of Dissolution	□ \$55.00 Filing Fee, Cartificate of Dissolution & Certified Copy (additional copy is analosed)
	Mailling Address: Registration Section	Street Address: Registration Section
	Division of Corporations P.O. Box 6327	Division of Corporations The Centre of Tailahassee
	Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tullahassee, FL 32303

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## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

	name of a limited liability co E SPA SERVICES, LLC	mpany is
. The	Articles of Organization wen	e filed on 03/30/2017 and assigned
docu	ment number L17000070919	<del></del>
Note	offective date of (offective date of ); If the date inserted in this bloom	solution if not effective on the date of fiting:  must be prior to or more than 90 days later than date document is received for filing) ack does not meet the applicable statutory filing requirements, this date will not be ste on the Department of State's records.
A des 605.0	scription of occurrence that a	esulted in the limited liability company's dissolution pursuant to section 605.0707 on back cover letter).
The co	onsent of all Members pursuant	to 605.0701(2),
	re are no members, enter the	name and address of the person appointed to wind up the company's
		SEC ALL
		UN 2
Signa ove to	ture of an authorized person wind up the company's acti	or if there are no members, the signature of the person appointed and listed
W	STAT	William Burrymowicz
	Signature	Printed Name

FILING FEE: \$25.00