217000077622

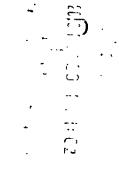
(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						

Office Use Only



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FEB 2 O 20: THARRIS

COVER LETTER

TO:	Registration Section Division of Corporations	
SUBJ	Notice of Limited Liability Company Dissolution - Ice Cryo 11 C	
	MENT NUMBER: L17000077622	
	closed Notice of Limited Liability Company Dissolution and fee are submitted for f	iling.
Please	return all correspondence concerning this matter to the following:	
Sco	ott D. Lehman, Esquire	
-	(Name of Contact Person)	
Eis	enberg Lehman, PLLC	
	(Firm/Company)	
255	Aragon Avenue, 2nd Floor	
	(Address)	
Co	al Gables, Florida 33134	
	(City/State and Zip Code)	
For fu	ther information concerning this matter, please call:	
Sco	ott D. Lehman, Esquire at (786) (Area Code) 709-9323 (Daytime Telephone Num	
-	(Name of Contact Person) (Area Code) (Daytime Telephone Num	nber)
Enclo	ed is a check for the following amount:	
■\$ 25	Filing Fee S \$30 Filing Fee & S \$55 Filing Fee & S \$60 Filing Fee, Certificate of Status Certified Copy Certificate of Status & (Additional copy is enclosed) Certified Copy (Additional copy is enclosed)	
	MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301	



January 24, 2018

SCOTT D LEHMAN EISENBERT LEHMAN, PLLC 255 ARAGON AVENUE, 2ND FLOOR CORAL GABLES, FL 33134

SUBJECT: ICE CRYO, LLC Ref. Number: L17000077622

We have received your document for ICE CRYO, LLC and your check(s) totaling \$140.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Corporation, but your entity is a LLC. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris Regulatory Specialist II

Letter Number: 018A00001563

RECEIVED
FEB 2 0 2013

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liabi	lity company is	·			
2.	The Articles of Organization	on were filed on $\frac{04/06/26}{1}$	017 and assigned			
	document number L170000	77622				
3.	The delayed effective date the dissolution if not effective on the date of filing: (effective date cannot be prior to or more than 90 days later than date document is received for filing) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not listed as the document's effective date on the Department of State's records.					
4.	A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).					
	Never pursued the purpose for which it was created.					
5	If there are no members, er	nter the name and addres	ss of the person appointed to wind up the company's			
٥.	ctivities and affairs: Scott D. Lehman, Esquire					
		Eisenberg Lehman, PLI	LC			
		255 Aragon Avenu, 2nd	d Floor			
		Coral Gables, Florida 3	3134			
6. lis	Signature of an authorized ted above to wind up the co	person or if there are no mpany's activities and a	members, the signature of the person appointed and affairs:			
	Paih Odmi	1	Scott D. Lehman			
	Signature	<u>'</u>	Printed Name • 53			
	· · · · · · · · · · · · · · · · · · ·					

FILING FEE: \$25.00

Notice of Limited Liability Company Dissolution

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: Ice Cryo, LLC	
Document number of Limited Liability Company is: L17000077622	
Date of dissolution was: December 31, 2017	
Description of information that must be included in a written claim:	
Claimant, Claim Amount, Description of Goods or	
Services Provided, Date(s) Good or Services Prov	/ided
	гът г- •
	23
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)	. 4
Eisenberg Lehman, PLLC	-
255 Aragon Avenue	7.7
2nd Floor	£ 7
Coral Gables, Florida 33134	
A claim against the above named limited liability company will be barred unless a proceeding to enforcemenced within 4 years after the filing of this notice.	orce the claim

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00

Scott D. Lehman

Printed Name of the Person Filing

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