L17000071831

(Requestor's Name)			
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(City/State/Zip/Phone #)			
F-1 F-1			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Duamess Entry Name)			
(Document Number)			
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2020 TH -9 PH 4: 40

COVER LETTER

Tallahassee, FL 32314

TO: Registration Section Division of Corporations			
SUBJECT: N'/BS of Florida, LLC (Name of Limited Liability Company)			
(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:			
James H Tindal Jr (Name of Person)			
(Name of Person)			
BSI, LL			
BSI, LU (Firm/Company)			
2131 Woodroù Roed ST 2100 #128			
(Address)			
Greenville SC 29607 (City/State and Zip Code)			
(City/State and Zip Code)			
For further information concerning this matter, please call:			
Jim Tindal at (803) 710-9204 (Name of Person) (Area Code & Daytime Telephone Number)			
(Name of Person) (Area Code & Daytime Telephone Number)			
Enclosed is a check for the following amount:			
□ \$25.00 Filing Fee and Certificate of Dissolution			
Mailing Address: Street Address:			
Registration Section Registration Section			
Division of Corporations P.O. Box 6327 Division of Corporations The Centre of Tallahassee			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

FILED

2023 JAN -9 PM 4: 40

1.	The name of a limited liability company is	- 711 4740
	NYBS of Florida, LLC	STARY OF STATE
		THE WHASSEE. FL
2.	The Articles of Organization were filed on April 6, 2017	and assigned
	document number <u>L17000077 831</u>	
3.	The delayed effective date the dissolution if not effective on the date of a (effective date cannot be prior to or more than 90 days later than Note: If the date inserted in this block does not meet the applicable statutory falsted as the document's effective date on the Department of State's records.	date document is received for filing)
4. •	A description of occurrence that resulted in the limited liability company 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).	's dissolution pursuant to section
-	Business Sold	
-		
_	<u> </u>	
	If there are no members, enter the name and address of the person appoint activities and affairs:	nted to wind up the company's
		
6. abo	Signature of an authorized person or if there are no members, the signature to wind up the company's activities and affairs:	are of the person appointed and listed
	A H MM Jame Signature Pr	inted Name
		rinted Name
	FILING FEE: \$25.00	