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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Try Black LLC (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:
Rachel Schaub (Name of Person)
(Name of Person)
Ivy Blair LLC (Firm/Company)
16831 NW (ranesville Rd
16831 NN Ganesville Rd Reddick FL 32686
(City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) (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 Certified Copy (additional copy is enclosed)
MAILING ADDRESS.

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liabilit	ity company is
IVY B	lair LLC
2. The Articles of Organization document number LITC	were filed on <u>May 04, 2017</u> and assigned
(effective d Note: If the date inserted in thi	ne dissolution if not effective on the date of filing: date cannot be prior to or more than 90 days later than date document is received for filing) nis block does not meet the applicable statutory filing requirements, this date will not be ive date on the Department of State's records.
605.0707, Florida Statutes, (c	
5. If there are no members, enter activities and affairs:	er the name and address of the person appointed to wind up the company's
6. Signature of an authorized pe listed above to wind up the comp	erson or if there are no members, the signature of the person appointed and apany's activities and affairs:
Partiel Sharl	Rachel Schaub Printed Name

FILING FEE: \$25.00