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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Best Fences of Indian River County LC (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:
T. Brad Springer (Name of Person)
TBS Constauction of Indian River INC
6245 1S+ SW (Address)
VERO BEACH FL 32968 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) (Name of Person) (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
Enclosed is a check for the following amount: Second Se

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 liability company is
Best Fences Of Indian RIVER County LLC
2. The Articles of Organization were filed on 11-14-17 and assigned
1 , - 4 00 2 2 4 0 0 /
document number <u>L17000234896</u>
0 29 2018
3. The delayed effective date the dissolution if not effective on the date of filing: 8-29-2018 (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 be
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).
Company Not Started because of
Local Licensing Issues. We were
Local Licensing Ibsues. We were not able to operate in Indian River
- Not work to operate in Indian level
Lounty, FL
5. If there are no members, enter the name and address of the person appointed to wind up the company's
activities and affairs:
SSS.
6. Signature of an authorized person or if there are no members, the signature of the person appointed and
listed above to wind up the company's activities and affairs.
X D SO
Signature Printed Name
1 inited traine

FILING FEE: \$25.00