## 1180000 60019

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

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2019 MOT 22 AH 10: 45

## **COVER LETTER**

Division of Cor		
SUBJECT:	BUDTIE	1E, LLC
3000ECT	(Name of Limit	ed Liability Company)
The enclosed Articles of	Dissolution and fee(s) are submit	ted for filing.
	ondence concerning this matter to	-
	TIME	EA LEWIS me of Person)
	(Nar	ne of Person)
	BUDTIM	E LLC m'Company)
	(Fin	m <sup>(</sup> Company)
	3200 N 00	EAN 3LUD # 1903
		Address)
	FIDER LAMOE	conce 33308 FL
	(City/Sta	ite and Zip Code)
For further information c	oncerning this matter, please call:	
_TIME	(Name of Person)	at ( <u>954</u> ) <u>6733639</u> (Area Code & Daytime Telephone Number)
Enclosed is a check for the	following amount:	
□ \$25.00 Filing Fee	and Certificate of Dissolution	☐ \$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)
MAII	LING ADDRESS:	STREET/COURIER ADDRESS:
_	tration Section	Registration Section
	ion of Corporations  Box 6327	Division of Corporations Clifton Building
	hassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE **Division of Corporations** 

September 30, 2019

TIMEA LEWIS 3200 N OCEAN BLVD. #1903 FORT LAUDERDALE, FL 33308

SUBJECT: BUDTIME, LLC Ref. Number: L18000060019

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document is illegible and not acceptable for imaging. We ask that you type or carefully print the information in the appropriate blocks.

You failed to make the correction(s) requested in our previous letter.

A description of the occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707(1)(c), Florida Statutes, must be contained in the document.

The Notice of Dissolution must contain a description of information that should be included in a written claim.

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) 245-6050.

Claretha Golden Regulatory Specialist II

Letter Number: 019A00020110



July 30, 2019

TIMEA LEWIS 3200 N OCEAN BLVD. #1903 FORT LAUDERDALE, FL 33308

SUBJECT: BUDTIME, LLC Ref. Number: L18000060019

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

A description of the occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707(1)(c), Florida Statutes, must be contained in the document.

The Notice of Dissolution must contain a description of information that should be included in a written claim.

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) 245-6050.

Claretha Golden Regulatory Specialist II

2019 SEP 20 PH 2: 17

Letter Number: 019A00015539

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

•, • • • ,

1.	The name of a limited liability company is 2019 FT 22	Áif 10: 45
	BUDTIME, LLC	
2.	The Articles of Organization were filed on 03/07/2011 and assigned	
	document number <u>L</u> 180000 60013	
3.	The delayed effective date the dissolution if not effective on the date of filing: 05 1 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 no listed as the document's effective date on the Department of State's records.	t be
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).	on
	inpedicity no 5AKS	
٥.	If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:	
	1000 NOCEAN OUN A1903	
	Transmer Fr - 33308	
6. lis	Signature of an authorized person or if there are no members, the signature of the person appointed and ted above to wind up the company's activities and affairs:	
	Then Laws	
	Signature Printed Name	

F1LING FEE: \$25.00