## L18000/88090

(R	equestor's Name)	
(A	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phone #)	
PICK-UP	WAIT MAIL	
(B	usiness Entity Name)	
(D	Occument Number)	
Certified Copies	Certificates of Status	
Special Instructions to	o Filing Officer:	

Office Use Only



400346066874

08/15/20--01015--029 \*\*25.00



JUL 23 2020 S. YOUNG

## **COVER LETTER**

Registration Section Division of Corporations

TO:

SUBJECT:	4738Black Bear Concepts, LLC	
SOBJECT.	(Name of Limit	ed Liability Company)
The enclosed	Articles of Dissolution and fee(s) are submit	ted for filing.
	all correspondence concerning this matter to	
r lease return a	in correspondence concerning this matter to	inc tonowing.
	Cynthia P McFarland	
	(Nar	ne of Person)
	Black Bear Concepts, LLC	
	(Fin	n/Company)
	595 Black Bear Rd	
	(	Address)
	Naples, FL 34113	
	(City/Sta	te and Zip Code)
For further inf	ormation concerning this matter, please call:	
Cyntl	hia P McFarland	239 775-4738
	(Name of Person)	at () (Area Code & Daytime Telephone Number)
Enclosed is a ch	eck for the following amount:	
	0 Filing Fee and Certificate of Dissolution	☐ \$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)
	ng Address:	Street Address:
_	stration Section	Registration Section
	sion of Corporations Box 6327	Division of Corporations The Centre of Tallahassee
	hhassee, FL 32314	2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liabil					
Black Bear Concepts, LLC	<u>dba: o</u>	Magtrainer	<u> 3 50/L</u>	otions	$\sim 60$ m
2. The Articles of Organizatio	n were filed on August 0	6, 2018	and assi	igned	
document number L180001	88090	_			
3. The delayed effective date t (effective Note: If the date inserted in t listed as the document's effective date to the delayed of the date inserted in the document's effective date to the delayed effective date to	this block does not meet the	e applicable statutory filing	document is	received for	
4. A description of occurrence 605.0707, Florida Statutes, (	that resulted in the limit copy 605.0707 on back	ed liability company's d	issolution	pursuant to	section
This business has not had any s	sales since it opened (e-con	nmerce),			
This business has not had any sa  5. If there are no members, entactivities and affairs:		of the person appointed	to wind up	o the comp	any's
	595 Black Bear Rd	,, <u>, , , , , , , , , , , , , , , , , ,</u>			
	Naples, FL 34113				
6. Signature of an authorized pabove to wind up the company	person or if there are no it's activities and affairs:	nembers, the signature o  Cynthia P McFarland	f the perso	n appointe	—— ed and listed
Signature			d Name		7021
	FILING E	FEE: \$25.00			NOTE !



## **NOTE:** This page is optional

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.

Document number of Limited Lia	L18000188090 ability Company is:	_
Date of dissolution was: April 04,	2020	_
Description of information that m	aust be included in a written claim:	
This company has not had any sales.	aba: alldogtraining solution cert# 21-8017564032-7 partner# 5520727	_ (0
-	partner # 5520727	_
	1	
	***	
		_
failing address where claims can	be sent: (Claims cannot be sent to the Division of Corporations)	_
failing address where claims can	be sent: (Claims cannot be sent to the Division of Corporations)	_
	be sent: (Claims cannot be sent to the Division of Corporations)	_
Black Bear Concepts. LLC	be sent: (Claims cannot be sent to the Division of Corporations)	_
Black Bear Concepts. LLC Cynthia P McFarland	be sent: (Claims cannot be sent to the Division of Corporations)	
Black Bear Concepts. LLC  Cynthia P McFarland  595 Black Bear Rd	be sent: (Claims cannot be sent to the Division of Corporations)	_

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

Signature of the Person Filing

Printed Name of the Person Filing