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## **COVER LETTER**

TO: Registration Section Division of Corporations			
SUBJECT: PURE MATURE C. (Name of Lim	BB LLC ited Liability Company)		
The enclosed Articles of Dissolution and fee(s) are submitted for filing.  Please return all correspondence concerning this matter to the following:			
NORMAN MO	DORE		
Name of Person)  PUDE NATURE CBD LLC (Firm/Company)			
2217 ALTOWA DREVE (Address)			
TALLAHASSEE FL 32309 (City/State and Zip Code)			
For further information concerning this matter, please call:			
MORMAN MOORE (Name of Person)	at ( <u>850</u> ) 322 -8690 (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)		
Mailing Address: Registration Section Division of Corporations	Street Address: Registration Section Division of Corporations		
P.O. Box 6327	The Centre of Tallahassee		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314



2020 FED 21 FM 1: 4:0

## FLORIDA DEPARTMENT OF STATE Division of Corporations

February 5, 2020

NORMAN MOORE 2217 ALTOONA DRIVE TALLAHASSEE, FL 32309

SUBJECT: PURE NATURE CBD "LLC"

Ref. Number: L19000055752

We have received your document for PURE NATURE CBD "LLC" and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

No document enclosed.

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.

Irene Albritton Regulatory Specialist II

Letter Number: 520A00002673

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## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

	ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY		
1.	ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY  The name of a limited liability company is  Pure MATURE CBD LLC  The Articles of Organization were filed on 2/26/2019 and assigned		
2.	The Articles of Organization were filed on $\frac{2/26/2019}{}$ and assigned		
	document number <u>L 19000055 752</u>		
3.	The delayed effective date the dissolution if not effective on the date of filing:  (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.	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).  BUSINESS PRACTICE XIEUER STAPTED UP.		
5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:			
6. ab	Signature of an authorized person or if there are no members, the signature of the person appointed and listed ove to wind up the company's activities and affairs:		
1	Morman Moore		
•	Signature Printed Name		

FILING FEE: \$25.00