

L19000148840

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

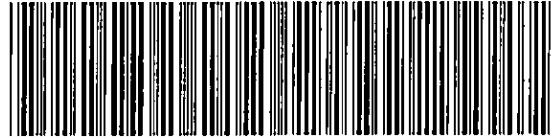
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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D SCOTT
JUN 18 2019

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195
REFERENCE : 809423 4303929
AUTHORIZATION : *[Signature]*
COST LIMIT : \$ 35.00

ORDER DATE : June 14, 2019
ORDER TIME : 8:41 AM
ORDER NO. : 809423-005
CUSTOMER NO: 4303929

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TALLAHASSEE, FLORIDA

DOMESTIC FILINGS

NAME: 1001 BB DRIVE, LLC

XX ARTICLES OF DISSOLUTION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

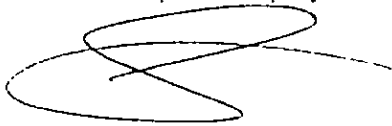
_____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY
_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner - EXT#

EXAMINER'S INITIALS: _____

**ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is
1001 BB DRIVE, LLC
2. The Articles of Organization were filed on 06/13/2019 and assigned
document number L19000148840
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. 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).
The Company never started up business and is changing its jurisdiction of organization to another jurisdiction.
There are no debts, obligations or liabilities of the Company. There are no suits pending against the Company in
any court.
5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:
Naomi Sakata
c/o Greenberg Traurig
333 SE 2nd Avenue, Suite 4400
Miami, FL 33131
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:



Signature

Naomi Sakata, Authorized Person

Printed Name

FILING FEE: \$25.00

FILED
JUN 17 A 3:55
CLERK OF CIRCUIT COURT
IN AND FOR THE COUNTY OF DADE
FLORIDA