

L19 000281979

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

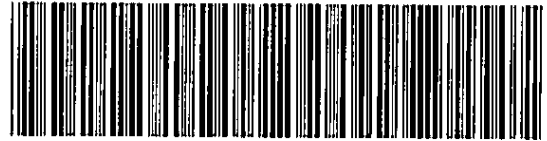
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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O SIMMONS

APR 28 2021

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: B&B Adventures, LLC

(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:

Mark Lippman

(Name of Person)

Lippman Law Offices, P.A.

(Firm/Company)

4767 New Broad Street

(Address)

Orlando, FL 32814

(City/State and Zip Code)

For further information concerning this matter, please call:

Mark Lippman

407

648-4213

at ()

(Name of Person)

(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
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

2021 FEB 25 AM 6:20

1. The name of a limited liability company is

B&B Adventures, LLC

2. The Articles of Organization were filed on 11/12/2019

and assigned

document number L19000281979

3. The delayed effective date the dissolution if not effective on the date of filing: February 15, 2021

(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).

Due to the Pandemic caused by Covid 19 the feasibility of continuing the business is limited.

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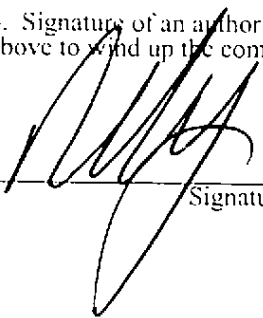
5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:

Mark Lippman, Esq.

4767 New Broad Street

Orlando, FL 32814

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

Mark Lippman, Esq.

Printed Name

FILING FEE: \$25.00