

La0000034837

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

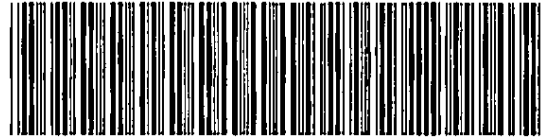
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

J. HORNE  
MAR 29 2023

Office Use Only



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01/23/23--01023--021 \*\*25.00

2023 JAN 23 PM 12:05  
SECRETARY  
TALLAHASSEE, FL  
D  
QD

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Humble Bee Detail & More

\_\_\_\_\_  
(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:

Debrines Ramirez

\_\_\_\_\_  
(Name of Person)

\_\_\_\_\_  
(Firm/Company)

548 Flower Fields Lane

\_\_\_\_\_  
(Address)

Orlando, Florida 32824

\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

Debrines Ramirez

407

625-5021

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**

2023 JAN 23 PM 12:07  
SECRETARY OF STATE  
FALL ARIZONA

1. The name of a limited liability company is

Humble Bee Detail & More

2. The Articles of Organization were filed on 01/28/2020 and assigned

document number L20000034837

3. The delayed effective date the dissolution if not effective on the date of filing: 01/15/2023  
(effective date cannot be prior to or more than 90 days later than date document is received for filing)

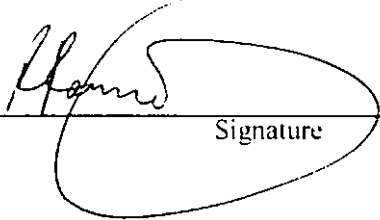
**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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).

Pursuant to the consent of all members

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. 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

Rafael F. Ramirez

Printed Name

**FILING FEE: \$25.00**