

1210000120 253

\_\_\_\_\_  
(Requestor's Name)

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

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

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

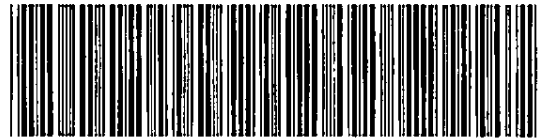
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



300380784393

2022 FEB -4 PM 11:37

2022 FEB -4 PM 11:37

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Bobbi's Blessings, 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:

Bobbi L. Rudd

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

Bobbi's Blessings, LLC

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

1700 Archie Sapp Road

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

Alford, FL 32420

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

For further information concerning this matter, please call:

Bobbi L. Rudd

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

850

394-2929

at (\_\_\_\_\_) \_\_\_\_\_

(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**

1. The name of a limited liability company is

Bobbi's Blessings, LLC

2. The Articles of Organization were filed on March 15, 2021 and assigned

document number L21000120253

3. The delayed effective date the dissolution if not effective on the date of filing: January 31, 2022  
(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).

Business Closed effective January 31, 2022.

Business Closed effective January 31, 2022.

Business Closed effective January 31, 2022.

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

Bobbi L. Rudd

1700 Archie Sapp Road

Alford, FL 32420

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

Bobbi L. Rudd

Printed Name

**FILING FEE: \$25.00**

## Notice of Limited Liability Company Dissolution

**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.

Name of Limited Liability Company: Bobbi's Blessings, LLC

Document number of Limited Liability Company is: L21000120253

Date of dissolution was: January 31, 2022

Description of information that must be included in a written claim:

Rationale as to why claim is being made to include but not limited to the day, date and time of incident resulting in claim. Individual's name, address, phone number, email and social media information to aid in verification of any claim. Law firm representing claimant to include individual attorney name, address, phone number and license number. Provide any supporting information justify claim.

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

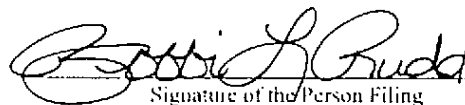
1700 Archie Sapp Road

Alford, FL 32420

A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Bobbi L. Rudd

Printed Name of the Person Filing

  
Signature of the Person Filing

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