

L21000172653

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

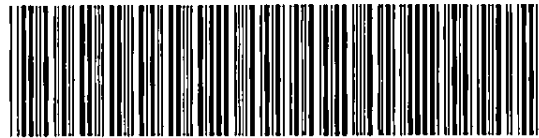
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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2023 MAR 17 PM 2:52
SECRETARY OF STATE
111 APAC ST, FRI 07100

A. RIVERS
MAY 19 2023

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: JB7 ENTERPRISES LLC

DOCUMENT NUMBER: L21000172653

The enclosed **Notice of Limited Liability Company Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

JUAN BURBOS

(Name of Contact Person)

JB7 ENTERPRISES LLC

(Firm/Company)

17831 NW 48TH PL

(Address)

MIAMI GARDENS, FL 33055

(City/State and Zip Code)

For further information concerning this matter, please call:

JUAN F. BURGOS

(Name of Contact Person)

at (786)

(Area Code)

399-5609

(Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$25 Filing Fee

☒ \$30 Filing Fee &
Certificate of Status

☐ \$55 Filing Fee &
Certified Copy
(Additional copy is enclosed)

☐ \$60 Filing Fee,
Certificate of Status & 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

Notice of Limited Liability Company Dissolution

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: JB7 ENTERPRISES LLC

Document number of Limited Liability Company is: L21000172653

Date of dissolution was: 12/31/2022

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

LLC COMPANY CLOSED

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

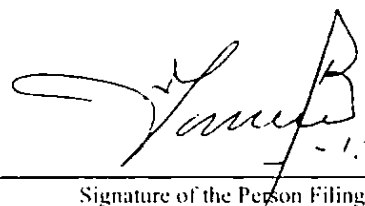
17931 NW 48TH PL

MIAMI GARDENS, FL 33055

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.

JUAN F. BURGOS

Printed Name of the Person Filing


Signature of the Person Filing