L22000330636

(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:					





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02/07/23--01006--085 **25.00

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COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: BJ ENI	DEAVOR LLC DISSOLUTIO	N	
DOCUMENT NU	L22000330636 MBER:		
The enclosed Notic	e of Limited Liability C	Company Dissolution and	I fee are submitted for filing.
Please return all con	rrespondence concerning	this matter to the followi	ng:
BRENDA ALLEN			
	(Name of C	Contact Person)	
BJ ENDEAVOR LLC			
	(Firm	/Company)	
19411 NORTH BY NO	ORTHWEST RD		
	(Ad	dress)	
TALLAHASSEE FLO	RDA 32310		
	(City/State	e and Zip Code)	
For further informa	tion concerning this matt	er, please call:	
BRENDA ALLEN		at ()	8282
(Name o	f Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check	for the following amoun	it:	
■\$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

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

FILED

1.	The name of a limited liabili	ty company is		2023 FEB -6 PM 4:	39		
	BJ ENDEAVOR LLC						
				TOLLA ASSEE. F	TE ⁻		
2.	The Articles of Organization	were filed on JULY 2	6, 2022	and assigned	-		
	document number L2200033	0636					
3.	The delayed effective date the	ne dissolution if not eff	fective on the date of	filing: 1/30/2023	ur x		
	Note: If the date inserted in the listed as the document's effective	his block does not meet t	he applicable statutory	a date document is received for a	aill not be		
4.	A description of occurrence 605.0707, Florida Statutes, (that resulted in the lim copy 605,0707 on back	nited liability compan cover letter).	y's dissolution pursuant to	section		
FAILED TO COMMENCE BUSINESS							
		<u> </u>					
5	If there are no members and	ar the name and address	se of the norean annoi	nted to wind up the compa	——		
٥.		enter the name and address of the person appointed to wind up the company's JAMIE BAILEY 1620 PUTT PUTT LANE TALLAHASSEE FL 32305					
	activities and affairs:						
		BRENDA ALLEN 19411 N BY NORTHWEST RD TALLAHASSEE FL					
		32310					
			- .				
				2.1			
o. abi	Signature of an authorized p ove to wind up the company	erson or if there are no s activities and affairs:	members, the signat	ire of the person appointed	and fisted		
		1 0 . 1					
	A	64	BRENDA ALLEN	& JAMIE BAILEY			
<u> </u>	Signatury	_P71		rinted Name			
		FILING	FEE: \$25.00				
	•/	FILING	F 1.15. \$45.00				