

Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name

: TRIAD PROFESSIONAL SERVICES, LLC

Account Number : I20020000094

Phone

: (770)777-2091

Fax Number

(770)220-1943

LLC DISS/WITH OR REV DISS

THE MURPHSTON GROUP, LLC

Certificate of Status	0
Certified Copy	1
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January 27, 2009

FLORIDA DEPARTMENT OF STATE Division of Corporations

THE MURPHSTON GROUP, LLC 4650 DONALD ROSS ROAD SUITE 200 PALM BEACH GARDENS, FL 33418

SUBJECT: THE MURPHSTON GROUP, LLC

REF: L04000025146

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Number three of the document must contain the date the decision to dissolve was approved or became effective. This date must be prior to the date this document was submitted for filing.

If you have any further questions concerning your document, please call (850) 245-6855.

Tammy Hampton Regulatory Specialist II FAX Aud. #: H09000017647 Letter Number: 909A00002854

Registration/Qualification Section

P.O BOX 6327 - Tallahassee, Florida 32314

COVER LETTER

TO: Registration Section Division of Corpor				
SUBJECT: THE MU	RPHSTON GRO	DUP, LLC		
30000011		lmited Liability C	ompany)	······································
The enclosed Articles of Di	spolution and fee(s) are su	bmitted for filing.		
Please return all correspond	ence concerning this matt	er to the following	;	
Sharor	n K. Gray			
		(Name of Person)		
Triad P	rofessional Ser			
(Firm/Contpany)				
2050 Marconi Drive, Suite 150				
		(Address)		
Alphar	Alpharetta, GA 30005			
(City/State and Zip Code)				
For further information cond	terning this matter, please	call:		٠.
Sharon K. C	Sray .	at (77	70 , 777-	2091
(0	Name of Person)	(/	rea Code & Daytim	e Telephane Number)
Enclosed is a abeck for the follo	owing amount:			
\$25.00 Filing Fee	30.00 Filing Fee & Certificate of Status	. \$55.00 Filir Certified (additiona		\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Registra Division P.O. Box	NG ADDRESS: tion Section of Corporations x 6327 see, FL 32314		STREET/COUREGISTRATION Se Division of Cor Clifton Buildin 2661 Executive Tallahassee, FL	porations g : Center Circle

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ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

SECRETARY OF STATE DIVISION OF CORPORATIONS

2. The Articles of Organization were filed on O-LO4000025146	4/02/2004 and assigned document number
3. The date the dissolution was approved: 10	131 08
4. A description of occurrence that resulted in the 608,441, Florida Statutes, (copy 608,441 on b.	e limited liability company's dissolution pursuant to section ack cover letter). secting business in the State of Florida.
Adequate provision has been made for	of the limited liability company have been paid or discharged. In the debts, obligations and liabilities pursuant to s. 608.4421. Istributed among its members in accordance with their respective
7. CHECK ONE:	
There are no suits pending against the OR- Adequate provision has been made for entered against it in any pending suit.	e company in any court. If the satisfaction of any judgment, order or decree which may be
gnatures of the members having the same percent	age of membership interests necessary to approve the dissolution;
Signature	Printed Name
	Stephen S.B. Preston
·	

FILING FRE: \$35.00

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