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108000026834

| (Requestor's Name) | |
|---|--------|
| (Address) | |
| (Address) | |
| (City/State/Zip/Phone #) | |
| PICK-UP WAIT | MAIL |
| (Business Entity Name) | |
| (Document Number) | |
| Certified Copies Certificates of S | Status |
| Special Instructions to Filing Officer: | |
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| | |

Office Use Only



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2009 MAY 12 AM 10: 10
SECRETARY OF STATE
SECRETARY OF STATE

T. CLINE MAY 13 2009 EXAMINER



April 13, 2009

TODD WALSH 1579 SW 9TH ST BOCA RATON, FL 33486

SUBJECT: SUMMERLAND PET CARE LLC

Ref. Number: L08000026834

We have received your document for SUMMERLAND PET CARE LLC and check(s) totaling \$35.00. However, the enclosed document has not been 组 and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline Regulatory Specialist II

Letter Number: 109A00012278

COVER LETTER

| Division of Corporations SUBJECT: Summer/and Pet Care, LLC | | |
|---|------------------------------|---|
| SUBJECT: Summer/and Pet Care, 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: | | |
| Todd M. Walsh | | |
| (Name of Person) | 크. 임 | |
| | SEC ALL | - |
| (Firm/Company) | 2009 HAY SECRET TALLAH | |
| 1579 SW9th St | SAR TO | m |
| (Address) | FS | ٠ |
| Bocg Raton, F1 33486 | AMIO: 10 SEE, FLORIDA | |
| (Ćity/State and Zip Code) | - | |
| For further information concerning this matter, please call: | | |
| Todd Walsh at (581) 445-78 (Name of Person) (Area Code & Daytime Telephone Numb | | |
| (Name of Person) (Area Code & Daytime Telephone Numb | jer) | |
| Enclosed is a check for the following amount: | | |
| \$25.00 Filing Fee & Certificate of Status | Status & | |
| | | |

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

| 1. The name of a limited liability company is SUMMER/and Pet Care, LLC. |
|---|
| 2. The Articles of Organization were filed on March 14, 2008 and assigned document number $\angle 0800026834$. |
| 3. The date the dissolution was approved: Mach 30, 7009. |
| 4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 608.441, Florida Statutes, (copy 608.441 on back coyer letter). (C) Upon (On Sent on behalf of all the man 55.5) |
| |
| To 5 |
| 5. CHECK ONE: |
| All debts, obligations and liabilities of the limited liability company have been paid or discharged. OR- Adequate provision has been made for the debts, obligations and liabilities pursuant to s. 608.4421. |
| 6. All remaining property and assets have been distributed among its members in accordance with their respective rights and interests. |
| 7. CHECK ONE: |
| There are no suits pending against the company in any court. OR- |
| Adequate provision has been made for the satisfaction of any judgment, order or decree which may be entered against it in any pending suit. |
| Signatures of the members having the same percentage of membership interests necessary to approve the dissolution: |
| Signature Printed Name |
| Toda M. Walsh |
| |
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