

L1100000 26738

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

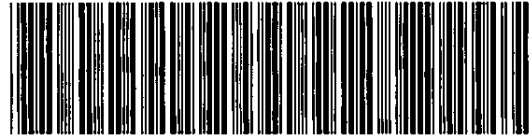
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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06/25/14--01013--010 **25.00

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14 JUN 27 PM 3:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUN 27 2014

T. BROWN

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: E-Tag, 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:

Stuart Seidel
(Name of Person)

E-Tag LLC
(Firm/Company)

1155 Broken Sound Parkway, Unit E
(Address)

Boca Raton, FL 33487
(City/State and Zip Code)

For further information concerning this matter, please call:

Stuart Seidel at (561) 998-9983
(Name of Person) (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/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

FILED
14 JUN 27 PM 3:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is

E-Tag, LLC

2. The Articles of Organization were filed on 3/3/2011 and assigned

document number L11000026738

3. The delayed effective date the dissolution if not effective on the date of filing: _____

(effective date cannot be prior to or more than 90 days later than date document is received for filing)

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).

No activity in LLC

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

Stuart Seidel

1155 Broken Sound Parkway Unit E

Boca Raton, FL 33487

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

Stuart Seidel

Printed Name

FILING FEE: \$25.00