

L130000057976

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

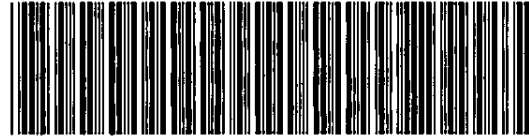
(Document Number)

Certified Copies _____

Certificates of Status ☒

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10/22/14--01008--003 **25.00

FILED
14 OCT 22 PM 2:25
CLERK OF STATE
TALLAHASSEE, FLORIDA

OCT 24 2014

T. BROWN

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Arcstar Books, 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:

Ezequiel Williams

(Name of Person)

(Firm/Company)

1443 SE Port St Lucie Blvd

(Address)

Port St Lucie, FL 34952

(City/State and Zip Code)

For further information concerning this matter, please call:

Ezequiel Williams

(Name of Person)

at (941) 914-3780

(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 OCT 22 PM 2:25
STATE OF FLORIDA
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is

Arcstar Books, LLC

2. The Articles of Organization were filed on April 19, 2013 and assigned

document number L13000057976

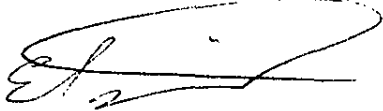
3. The delayed effective date the dissolution is not effective on the date of filing: _____
(effective date cannot be prior to or more than 90 days later than date document is received for filing)

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).

Voluntary closing of business due to low sales volume.

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

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

Ezequiel Williams

Printed Name

FILING FEE: \$25.00