

DATE

FOR OFFICIAL USE

NUMBER

04/13/2000

03307

DEBIT MEMORANDUM

925000000

To: DEPT. OF STATE

012

012

\$1,996.25
0.00_
1,996.25
0.00

45-20-2-130001-45300000-00-000100-00

45-20-2-130001-45300000-00-000100-00

700003266927:

Distribution

Cross Ref	Samas Code	Reason	Amount
-109			
012	45-20-2-130001-45300000-00-000100-00	OTHER	10.00
012	45-20-2-130001-45300000-00-000100-00	INSUFFICIENT FUNDS	50.00
012	45-20-2-130001-45300000-00-000100-00	INSUFFICIENT FUNDS	70.00
012	45-20-2-130001-45300000-00-000100-00	OTHER	70.00
012	45-20-2-130001-45300000-00-000100-00	INSUFFICIENT FUNDS	78.7 <i>5</i>
012	45-20-2-130001-45300000-00-000100-00	INSUFFICIENT FUNDS	87.50
012	45-20-2-130001-45300000-00-000100-00	INSUFFICIENT FUNDS	130.00
012	45-20-2-130001-45300000-00-000100-00	ACCOUNT CLOSED	150.00
012	45-20-2-130001-45300000-00-000100-00	OTHER	150.00
012	45-20-2-130001-45300000-00-000100-00	INSUFFICIENT FUNDS	150.00

OTHER

Grand Total:

\$1,996.25

INSUFFICIENT FUNDS

03307-

150.00

900.00

The above named fund(s) has been reduced by the amount of this check(s) under the Bill Notion authority of Section 215.34, F.S.

Process Date: 04/06/2000

State Treasurer

126117029066 1345 05 2562 5772 20 04-0000130001 TROY ABERCROMBIE OR WANDA ABERCROMBIE OL SCOLLINGENIE VALLEY RD 770-979-9349 Date 3-24-2078 64-7020/2611 STATE 100 150.00 1014

DEPT OF STATE 4500453 FOR DEPOSIT ONLY -03/27/00--01131--012 1003068736 ****130.00 2128



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

April 18, 2000

Troy Abercrombie or Wanda Abercrombie 4702 Lucerne Valley Rd. Lilburn, GA 30047

SUBJECT: LEVEL 5, LLC Ref. Number: L00000003697

Debit Memo #: 03307-G

This is to inform you that your check #1014 dated March 24, 2000 in the amount of \$130.00 and submitted for LEVEL 5, LLC has been returned to us by your bank because of Insufficient Funds.

We request that you remit a cashier's check or money order in amount of \$145.00 made payable to the Department of State. This amount will cover the unpaid check and the service fee required by law under section 215.34, Florida Statutes.

When sending the cashiers check or money order, please indicate the debit memo number and that it is a replacement for the returned check mentioned above.

Please note: The documents filed in this office with the returned check will be cancelled unless a replacement check is received within 30 days from the date of this letter. Send the replacement check to:

Letter number: 200A00021090

Division of Corporations Attn: Melinda Lilliston P.O. Box 6327 Tallahassee, FL 32314

If you have any questions concerning the returned check, please call (850) 487-6900.

Sincerely, Melinda Lilliston Administrative Assistant II Division of Corporations

cc:Level 5, LLC 3501-B N. Ponce De Leon Blvd.Ph332 St. Augustine, Fl. 32084



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

May 25, 2000

Troy Abercrombie or Wanda Abercrombie 4702 Lucerne Valley Rd. Lilburn, GA 30047

SUBJECT: LEVEL 5, LLC Ref. Number: L00000003697

Debit Memo #: 03307-G

Due to your failure to respond to our previous letter advising you of the returned check #1014, the Articles of Organization for LEVEL 5, LLC have been cancelled and are considered not filed as of May 25, 2000.

The name of your limited liability company is now available for use.

If you have any questions concerning the returned check, please call (850) 487-6900.

Letter number: 800A00029918

Sincerely Melinda Lilliston Administrative Assistant II Division of Corporations

cc:Level 5, LLC 3501-B N. Ponce De Leon Blvd.,Ph332 St. Augustine, Fl. 32084