

LABORCOISE

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

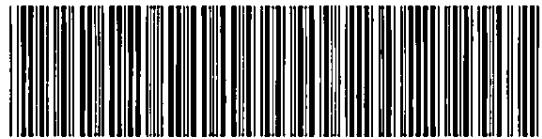
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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DEC 14 A 3:41
LABORCOISE

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LABORCOISE

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DEC 13 2017

FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302

155 Office Plaza Dr Ste A Tallahassee FL 32301

PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE: 12/14/17

NAME: SHARED MAIL ACQUISITIONS, LLC

TYPE OF FILING: DISSOLUTION

COST: 25.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE

Abbie Hodge

FILED
DEC 14 2017
TALLAHASSEE, FL 32302

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Shared Mail Acquisitions, 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:

Ann-Marie McGaughey

(Name of Person)

Dentons US LLP

(Firm/Company)

303 Peachtree Street, NE Suite 5300

(Address)

Atlanta, GA 30308-3265

(City/State and Zip Code)

For further information concerning this matter, please call:

Ann-Marie McGaughey

(Name of Person)

404

527-8354

at ()

(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

FILED
JUN 11 2013
TALLAHASSEE, FL
CLERK OF COURT
JULIA A. BROWN

**ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is

Shared Mail Acquisitions, LLC

2. The Articles of Organization were filed on 12/20/2000 and assigned

document number L00000015868

3. The delayed effective date the dissolution if not effective on the date of filing: December 31, 2017
(effective date cannot be prior to or more than 90 days later than date document is received for filing)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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).

The consent of all the members.

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

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

Thomas McCloskey
Printed Name

FILING FEE: \$25.00

FILED
DEC 21 11 A 34 AM
TALLAHASSEE, FLORIDA

Notice of Limited Liability Company Dissolution

NOTE: This page is optional

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company: Shared Mail Acquisitions, LLC

Document number of Limited Liability Company is: 1.00000015868

Date of dissolution was: December 31, 2017

Description of information that must be included in a written claim:

Any person with a claim against the Company may file a claim with the Company at 3060 Bohicket Rd.,
Johns Island, SC 29455, Attention: Thomas McCloskey, stating the name and address of the actual claimant,
the amount of such claim, the written documents, if any, upon which such claim is founded, and such other facts
sufficient to identify the nature and amount of such claim.

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

3060 Bohicket Rd.

Johns Island, SC 29455

Attention: Thomas McCloskey

A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Thomas McCloskey

Printed Name of the Person Filing


Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00