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

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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations
SUBJECT: Nation Wide high datas & Detribators (Namb 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:
Denis Haldeann (Name of Person)
Mationwide higuidantoes & Statistics
(Address)
W.M.Ami Pl. 33181. (City/State and Zip Code)
For further information concerning this matter, please call:
Denne Halderman at (35) 947-3599 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \text{Certificate of Status} \text{S55.00 Filing Fee & Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)}

STREET ADDRESS:

Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:

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



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

July 14, 2005

DENNIS HALDERMAN NATIONWIDE LIQUIDATORS & DISTRIBUTORS 1640 N.E. 148TH STREET N. MIAMI, FL 33181

SUBJECT: NATIONWIDE LIQUIDATORS AND DISTRIBUTORS, LLC Ref. Number: L01000008779

We have received your document for NATIONWIDE LIQUIDATORS AND DISTRIBUTORS, LLC, however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$25.00.

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

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Michelle Hodges Document Specialist

Letter Number: 505A00046572

ARTICLES OF DISSOLUTION FOR A FLORIDA LIMITED LIABILITY COMPANY

1. The name of the limited liability company is
MATIONWICE Liquilators & Distributors, LLC
2. The date the dissolution was approved:
3. A description of the occurrence that resulted in the limited liability company's dissolution pursuant to section 608.441, Florida Statutes, (copy of 608.441 on back of cover letter).
LACK of Revenue on Sortes.
Insufferent Contoner 1981.
Not Enough long standier besons
4. CHECK ONE: All debts, obligations and liabilities of the limited liability company have been paid or dischargedOR-
Adequate provision has been made for the debts, obligations and liabilities pursuant to s. 608.4421.
5. All remaining property and assets have been distributed among its members in accordance with their respective rights and interests.
6. CHECK ONE: There are no suits pending against the company in any courtOR-
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 Typed or Printed name
Dennis HAlderman