

L02 0000 25717

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

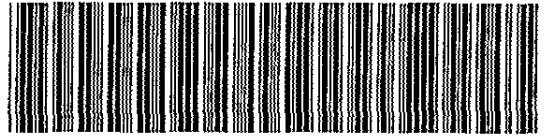
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10/03/03--01039--017 **25.00

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03 OCT -3 AM 11:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10/10
[Signature]

ALB, LLC
115 Penn Warren Drive
Suite 300-385
Brentwood, TN 37027

September 30, 2003

Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

Re: Dissolution of ALB, LLC

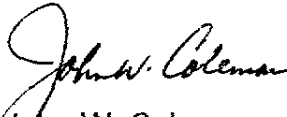
With regards to our LLC, we wish to dissolve ALB, LLC effective October 1, 2003. Enclosed please find the filing fee accompanied by the proper form as required to dissolve our LLC.

Should there be any questions, do not hesitate to call on us at 615-661-4721.
Our mailing address is as follows:

ALB, LLC
115 Penn Warren Drive
Suite 300-385
Brentwood, TN 37027

We appreciate your assistance in this matter.

Sincerely,


John W. Coleman
Manager

Enclosures

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

1. The name of the limited liability company is ALB, LLC

2. The effective date of the limited liability company's dissolution is October 1, 2003

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).

LLC sold all of its assets and distributed all proceeds to its individual members

4. **CHECK ONE:**

☐ All debts, obligations and liabilities of the limited liability company have been paid or discharged.

-OR-

☒ 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 court.

-OR-

☐ 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

John W. Coleman

Typed or Printed name

John W. Coleman, Manager

Filing Fee: \$25.00

FILED
03 OCT - 3 AM 11:23
TALLAHASSEE, FLORIDA
SECRETARY OF STATE