

LO2000031726

(Requestor's Name)

(Address)

(Address)

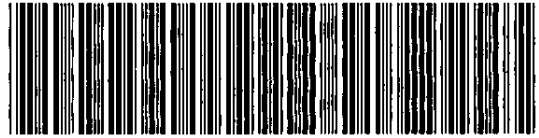
(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____



600162485306

11/30/09--01025--030 **35.00

Special Instructions to Filing Officer:

L. SELLERS

FEB - 9 2010

EXAMINER

RECEIVED

2009 NOV 30 AM 8:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Office Use Only

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10 FEB - 8 PM 3: 20

FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SUBLIMINAL ASSISTANCE, 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:

TIM CURTIS
(Name of Person)

SUBLIMINAL ASSISTANCE, LLC
(Firm/Company)

105 BARTRAM PARKE DRIVE
(Address)

ST. JOHNS, FL 32259
(City/State and Zip Code)

For further information concerning this matter, please call:

TIM CURTIS at (904) 307-9324
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- \$25.00 Filing Fee
- \$30.00 Filing Fee & Certificate of Status
- \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$60.00 Filing Fee, Certificate of Status & 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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 1, 2009

TIMOTHY J. CURTIS
105 BARTRAM PARKE DRIVE
ST. JOHNS, FL 32259

SUBJECT: SUBLIMINAL ASSISTANCE LLC
Ref. Number: L02000031726

We have received your document for SUBLIMINAL ASSISTANCE LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LLC. Please complete and return the enclosed blank form(s).

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.

Leslie Sellers
Regulatory Specialist II

Letter Number: 909A00036841

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is

SUBLIMINAL ASSISTANCE, LLC

2. The Articles of Organization were filed on 11/25/2002 and assigned document number

LO2000031726

3. The date the dissolution was approved: 09/30/2009

4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 608.441, Florida Statutes, (copy 608.441 on back cover letter).

MEMBER DECISION DUE TO LACK OF BUSINESS
AND CONTINUOUS NEGATIVE CASH FLOW

5. 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.

6. All remaining property and assets have been distributed among its members in accordance with their respective rights and interests.

7. 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

Printed Name

John McKay
Tim Curtis

JOHN MCKAY
TIM CURTIS

FILING FEE: \$25.00

FILED
10 FEB - 8 PM 3: 20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA