

W3 000001280

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

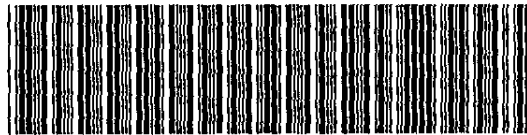
(Document Number)

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2005 OCT 31 PM 12:59  
STANLEY DE S. ROSE  
ADMINISTRATIVE

W3-1280  
a



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

October 3, 2005

JUNE PAINTER  
4390 PAINTER LANE  
MELBOURNE, FL 32934

SUBJECT: CORNERSTONE GROUP BENEFITS, LLC  
Ref. Number: L03000001280

We have received your document for CORNERSTONE GROUP BENEFITS, LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Number three of the document must contain the date the decision to dissolve was approved or became effective. This date must be prior to the date this document was submitted for filing.

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) 245-6020.

Tammi Cline  
Document Specialist

Letter Number: 005A00059887

2005 OCT 31 PM 12:59  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Cornerstone Group Benefits LLC  
(Name of Limited Liability Company)

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

June L. Painter  
(Name of Person)  
Cornerstone Group Benefits LLC  
(Firm/Company)  
4390 Painter Lane  
(Address)  
Melbourne, FL 32934  
(City/State and Zip Code)

For further information concerning this matter, please call:

June L. Painter at (405) 387-4641  
(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

RECEIVED  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FL  
OCT 31 11:12:59

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

1. The name of a limited liability company is

Cornerstone Group Benefits LLC

2. The Articles of Organization were filed on 13 January 2003 and assigned document number

16 1647910

3. The date the dissolution was approved: 8 August, 2005

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).

Not making any money.

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

June L. Painter  
Christine Canavan

June L. Painter  
Christine Canavan