L0300004790

(F	Requestor's Name)	
(Address)		
· (A	Address)	
(C	City/State/Zip/Phone #)	
☐ PICĶ-UP	WAIT MAIL	
(Business Entity Name)		
(L	Oocument Number)	
Certified Copies	Certificates of Status	
Special Instructions to Filing Officer:		
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Office Use Only



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OPERITOR STATE

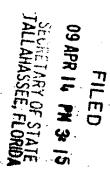
OPPRITOR STATE

OPP

B. KOHR

APR 1 4 2009

EXAMINER





ACCOUNT NO. : 072100000032

REFERENCE : 92953 7697087

AUTHORIZATION : TOTAL PROPERTY OF THE P

CONTACT PERSON: Susie Knight - EXT# 2956

____ CERTIFICATE OF GOOD STANDING

CERTIFIED COPY
XX PLAIN STAMPED COPY

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

EXAMINER'S INITIALS:

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

ALLSAFE, LLC	
2. The Articles of Organization were filed on $\frac{02/10/2}{L03000004790}$	003 and assigned document number
3. The date the dissolution was approved: 4-8-	2009
4. A description of occurrence that resulted in the limite 608.441, Florida Statutes, (copy 608.441 on back cov WYOMING DOMESTICATION	
5, CHECK ONE:	
-OR-	nited liability company have been paid or discharged. bts, obligations and liabilities pursuant to s. 608.4421.
All remaining property and assets have been distribute rights and interests.	ed among its members in accordance with their respective
7. CHECK ONE:	
There are no suits pending against the compa OR- Adequate provision has been made for the sat entered against it in any pending suit.	ny in any court. tisfaction of any judgment, order or decree which may be
gnatures of the members having the same percentage of m	nembership interests necessary to approve the dissolution:
Signature V	Printed Name
Limbure.	Alfonso Campalans
	•

FILING FEE: \$25.00