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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

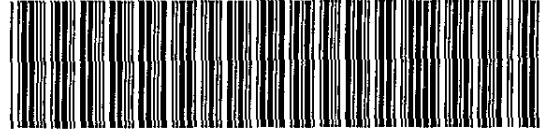
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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DIVISION OF CORPORATIONS
03 JUL 16 PM 12:59

3p

PARADISE FORMULATIONS LLC

July 12, 2003

Florida Division of Corporations

Dear Sir or Madam:

Please process the Articles of Dissolution I have included. I have also included a check for the amount of \$25.00 USD for the filing fee.

Please send the letter of acknowledgment to the following addresse:

John P Thomas

136 Cypress Way E #6

Naples, FL 34110

Telephone: 239-289-8474

Sincerely,



John P Thomas

03 JUL 16 PM 12:59

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DIVISION OF CORPORATIONS

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

1. The name of the limited liability company is

PARADISE FORMULATIONS
LLC

2. The effective date of the limited liability company's dissolution is

5-31-2003

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).

LACK OF INCOME - LACK OF INTEREST OF
ALL PARTNERS TO CONTINUE BUSINESS

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. 608.442.

5. All remaining property and assets have been distributed among its members in accordance with the 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

[Signature]
[Signature]

Typed or Printed name

JOHN F. THOMAS
Jason M. Carter

Filing Fee: \$25.00

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03/06/03 12:59 PM