10300015414

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
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2010 APR 12 AM 8: 52
SECRETARY OF STATE
SECRETARY OF STATE

T. CLINE

APR 1 3 2010

EXAMINER

3/544



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 23, 2010

VICKIE PERRON 4000 PIMLICO DRIVE, STE 114-170 PLEASANTON, CA 94588

SUBJECT: ONE RESOURCE PLACE, LLC

Ref. Number: L03000015414

We have received your document for ONE RESOURCE PLACE, LLC, how with upon receipt of your document no check was enclosed. Please return your document along with a check or money order made payable to diffe Department of State for \$25.00.

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

A description of the occurrence that resulted in the limited liability company's dissolution pursuant to section 608.441, Florida Statutes, must be contained in the document.

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 Regulatory Specialist II

Letter Number: 510A00007101

COVER LETTER

one Resourc	e Place, LLC	
of Dissolution and fee(s) are su	bmitted for filing.	
pondence concerning this matte	er to the following:	
l	ILKIE PERRON	2010 APR 12 AN B: STATE AND SECRETARY OF STATE AND SEEF, FLOR
		MAPR 12 M 8: 52 LAHASSEE, FLORIDA (4, 170
	PAE RESOURCE Pla	ce, 66 C
	(Firm/Company)	1.10 66
		14-170 RIGHT 52
	(Address)	*
	Mansanton CA 945	K &*
(Cit	y/State and Zip Code) (Forme	orly 825 Buckeye Lane We JACKSONVIlle, fe 322
concerning this matter, please	call:	,
	at (650) 504	1-6009
(Name of Person)	(Area Code & Daytime	e Telephone Number)
e following amount:		
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
	(City concerning this matter, please (Name of Person) (Name of Person) (Rame of Lordon and fee(s) are substituted as a concerning this matter, please (Name of Person)	(Name of Person) (Area Code & Daytime te following amount: 230.00 Filing Fee & \$55.00 Filing Fee &

MAILING ADDRESS:

TO:

Registration Section

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

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is One Resource PLACE, L	-G
2. The Articles of Organization were filed on	and assigned document number
10300015414.	
3. The date the dissolution was approved:	** ** ** ** ** ** ** **
4. A description of occurrence that resulted in the limited liab 608.441, Florida Statutes, (copy 608.441 on back cover let	er).
No longer pursuing	BUSINUSS FOS Munique
5. CHECK ONE:	27 25
All debts, obligations and liabilities of the limited OR-Adequate provision has been made for the debts, o	
All remaining property and assets have been distributed am rights and interests.	ong its members in accordance with their respective
7. CHECK ONE:	
There are no suits pending against the company in -OR- Adequate provision has been made for the satisfact entered against it in any pending suit.	ion of any judgment, order or decree which may be
ignatures of the members having the same percentage of members	ership interests necessary to approve the dissolutions
Signature	Printed Name
	Vickle Perron
	····