

LD 3000039245

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP☐ WAIT☐ MAIL

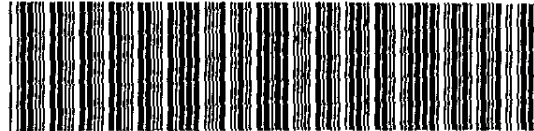
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000043203470

12/09/04--01/02/05 **50.00

W/12/16/04

FILED
2004 DEC -9 PM 1:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

31

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MATRIX NETWORK ORLANDO, L.L.C.

(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:

Horton Johnson

(Name of Person)

MATRIX NETWORK ORLANDO, L. L. C.

(Firm/Company)

20 North Orange Avenue, Suite 1400

(Address)

Orlando, Florida 32801

(City/State and Zip Code)

For further information concerning this matter, please call:

Horton Johnson

(Name of Person)

at (407-) 492-4948

(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)

STREET ADDRESS:

Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

FILED
2004 DEC -9 PM 1:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF DISSOLUTION
FOR
A FLORIDA LIMITED LIABILITY COMPANY

1. The name of the limited liability company is

MATRIX NETWORK ORLANDO, L.L.C.

2. The date the dissolution was approved: NOVEMBER 13, 2004

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).

Unanimous written consent of the Members.

FILED
2004 DEC -9 PM 1:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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. 608.4421.

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

Typed or Printed name

Horton S. Johnson

Horton Johnson

Jason Carlson

Jason Carlson

Tom Broadhead

Tom Broadhead

Robert Curry

Robert Curry

Filing Fee: \$25.00