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| (Requestor's Name) |
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| (City/State/Zip/Phone #) |
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| PICK-UP WAIT MAIL |
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| (Business Entity Name) |
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| (Document Number) |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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NO3-40600



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SECHETIARY OF STATE TALLAHASSEE, FLORIDA

M. THOMAS
OCT 2 7 2008
EXAMINER

COVER LETTER

| FO: Registration Section Division of Corporations | | | |
|--|------|--------------------|--------------|
| SUBJECT: Latitudes Coffee Roasters, LLC (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: | | | |
| Touche retain an extrempendence extreming and manual to the rolle wing. | | | |
| Barbara Johnston | | | |
| (Name of Person) | | | |
| | | | |
| (Firm/Company) | | | |
| PD Box 15864 | | | |
| (Address) | | | |
| Forma dina Rosal El 22025 | | | |
| Fernardina Beach FL 32035 (City/State and Zip Code) | Þω | 50 | |
| | E | 30 E | • |
| For further information concerning this matter, please call: | ASS | 12 | 77 |
| Parhous C Johnston , 904, 583-0014 | | 03 0CT 24 AM M: 16 | |
| (Name of Person) (Area Code & Daytime Telephone Number) | ST/ | <u> </u> | (_, , |
| | AH E | 5 | |
| Enclosed is a check for the following amount: | | | |
| \$25.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee & Certificate of Status Certificate of Status (additional copy is enclosed) Certificate of Status Certified Copy (additional copy is enclosed) | s & | | |
| | | | |

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

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

| 1. The name of a limited liability company is |
|--|
| Latitudes Coffee Roasters, 11C |
| 2. The Articles of Organization were filed on 10/23/2003 and assigned document number 10300004060. |
| 3. The date the dissolution was approved: $10/19/2008$ |
| 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). |
| A limited liability company organized under this chapter shall |
| be dissolved + the limited liability company's affairs shall be |
| Concluded upon the written consent at the sole managing |
| member Barbara (. Johnston (le) |
| 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. |
| Adequate provision has been made for the satisfaction of any judgment, order or decree where the satisfaction of any judgment, order or decree where the satisfaction of any judgment, order or decree where the satisfaction of any judgment, order or decree where the satisfaction of any judgment, order or decree where the satisfaction of any judgment, order or decree where the satisfaction of any judgment, order or decree where the satisfaction of any judgment, order or decree where the satisfaction of any judgment, order or decree where the satisfaction of any judgment, order or decree where the satisfaction of any judgment, order or decree where the satisfaction of any judgment, order or decree where the satisfaction of any judgment, order or decree where the satisfaction of any judgment, order or decree where the satisfaction of any judgment, order or decree where the satisfaction of any judgment, order or decree where the satisfaction of any judgment or decree where the satisfaction or decree where the satisfaction or decree where the satisfaction o |
| Signatures of the members having the same percentage of membership interests necessary to approve the dissolution: |
| Signature Printed Name |
| Barbara C. Johnston |
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FILING FEE: \$25.00