## 10300054540

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)  103-54540  (Document Number)				
(Document Number)  Certified Copies Certificates of Status				
Special Instructions to Filing Officer:  2/27  CUKS				

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02/06/06-01042--009 \*\*25.00

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	COV	ER LETTER	
TO: Registration Se Division of Co			
SUBJECT: Omni		mited Liability Company)	******
The enclosed Articles o	f Amendment and fee(s) are sul	bmitted for filing.	
Please return all corresp	ondence concerning this matter	r to the following:	
Kev	rin F OBrien		
1101		Name of Person)	· · · · · · · · · · · · · · · · · · ·
		(Firm/Company)	
<u>24</u>	10 Sparwood Dr	,	
		(Address)	
Du	ham, NC 27705		···
	(City	/State and Zip Code)	
For further information	concerning this matter, please	call:	
Kevin O	Brien	at ( 919 ) 309- (Area Code & Daytime	0842
	(Name of Person)	(Area Code & Daytime	Telephone Number)
Enclosed is a check for th	e following amount:		
<b>2</b> \$25.00 Filing Fee	S30.00 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)
MA	ILING ADDRESS:	STREET/COU	RIER ADDRESS:

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

Registration Section
Division of Corporations
Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301



February 14, 2006

KEVIN F. OBRIEN 2410 SPARWOOD DR DURHAM, NC 27705

SUBJECT: OMNI FORMULAS LLC Ref. Number: L03000054540

We have received your document for OMNI FORMULAS LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date of approval listed in number 3 must be prior to the file date of 2/6/06, also, the document must be signed.

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) 245-6967.

Letter Number: 306A00010596

Michelle Hodges Document Specialist

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

2 740

Omni Formulas LLC	
2. The Articles of Organization were filed on 12/1	19/2003 and assigned document number
L03000054540	Ţ.
3. The date the dissolution was approved: 12/31/2	2005
4. A description of occurrence that resulted in the l 608.441, Florida Statutes, (copy 608.441 on bac	limited liability company's dissolution pursuant to section is cover letter).
Moved Out of State	·
5. CHECK ONE:	
	the limited liability company have been paid or discharged.
-OR- Adequate provision has been made for t	the debts, obligations and liabilities pursuant to s. 608.4421.
6. All remaining property and assets have been disrights and interests.	stributed among its members in accordance with their respective
7. CHECK ONE:	
There are no suits pending against the c	company in any court.
OR- Adequate provision has been made for tentered against it in any pending suit.	the satisfaction of any judgment, order or decree which may be
gnatures of the members having the same percentag	ge of membership interests necessary to approve the dissolution:
Signature	Printed Name
Man Eleven	Kevin F OBrien
	06 F
	FEB 27 LAHASSE
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