# L04000011388

(Requestor's Name)		
(Ad	ldress)	<u> </u>
	,	
-		
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
_	<del>_</del>	<del></del>
(Bu	isiness Entity Nan	ne)
(Do	cument Number)	
Codified Coulon	Cartificata	of Chatria
Certified Copies	_ Certificates	or Status
Special Instructions to	Filing Officer:	
<b>.</b>		

Office Use Only



500150265165

04/16/09--01009--023 \*\*35.00

FILED
2009 MAY 14 PM 2: 56
SECRETARSEE, FLORIDA

C. LEWIS

MAY 1 5 2009

EXAMINER

#### **COVER LETTER**

TO: Amendment Section	••		
Division of Corporations			
-			
SUBJECT: DISSOLVTION OF	1		
SUBJECT: STANDO GON OF	2010/01/LE LLON		
DOCUMENT NUMBER: <u>60400001138</u>	8		
The enclosed Articles of Dissolution and fee are subm	itted for filing.		
Please return all correspondence concerning this matter	to the following:		
Cam M Gu	1 112-		
(Name of Contact Person)			
·			
GILLISPIE ENTARPRISE LLC.  (Firm/Company)  1379 ALBITUS CIRCLE			
(Firm/Company	) ' ?		
LACO COMPANSOR	LIECLE MANAGET		
(Address)			
* * * * * * * * * * * * * * * * * * * *			
OVIETO, FL 32765			
(City/State and Zip Code)			
For further information concerning this matter, please	eall:		
. 5			
Can M. Guine	11.2 1100 11701		
(Name of Contact Person) at (	90+ ) 988-9176		
(Name of Contact Person)	Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount:			
	Filing Fee & 🚨 \$52.50 Filing Fee,		
Certificate of Status Certified	= <del>-</del>		
enclose	al copy is Certified Copy d) (Additional copy is		
Chiclose	enclosed)		
MAILING ADDRESS:	STREET ADDRESS:		
Amendment Section	Amendment Section		
Division of Corporations Division of Corporations			

P.O. Box 6327

Tallahassee, FL 32314

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building



April 28, 2009

SAM M. GILLISPIE GILLISPIE ENTERPRISES LLC 1379 ARBITUS CIRCLE OVIEDO, FL 32765

SUBJECT: GILLISPIE ENTERPRISES LLC

Ref. Number: L04000011388

We have received your document for GILLISPIE ENTERPRISES LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

Please return the corrected original and one copy of 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) 245-6047.

Letter Number: 909A00014196

Carolyn Lewis
Regulatory Specialist II
Registration/Qualification Section



Registration Section

#### **COVER LETTER**

SUBJECT:  GILLIGNE GATCALPRISES 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:  SAMMIE M. GILLIGPIC  (Name of Person)  GILLIGPIC GATCAPRISE LLC  (Firm/Company)  1379 ARBITUS CIRCLE  (Address)  OVIDO, FL 32765  (City/State and Zip Code)  For further information concerning this matter, please call:  SAM HGILLISPIC  (Name of Person)  Enclosed is a check for the following amount:  [\$25.00 Filing Fee  Certificate of Status & Certificate of Status & Certificate Oxy (Sadditional copy is enclosed)  [\$60.00 Filing Fee, Certificate of Status & Certified Copy (Sadditional copy is enclosed)	Divis	ion of Corporations		
The enclosed Articles of Dissolution and fee(s) are submitted for filing.  Please return all correspondence concerning this matter to the following:  SAMMIE M. GILLISPIE (Name of Person)  GILLISPIE ENTARPLISE LLC (Firm/Company)  1379 ARBITUS CIRCLE (Address)  OVIED OF TL 32765 (City/State and Zip Code)  For further information concerning this matter, please call:  SAMMGILLISPIE (Name of Person)  Enclosed is a check for the following amount:  [\$25.00 Filing Fee 30.00 Filing Fee & Certificate of Status & Ce	SUBJECT:	GILLISPIG ENTERPRISES LLC		
Please return all correspondence concerning this matter to the following:    SAMMIE M. GILLISPIE (Name of Person)	(Name of Limited Liability Company)			
Please return all correspondence concerning this matter to the following:    SAMMIE M. GILLISPIE (Name of Person)				
Please return all correspondence concerning this matter to the following:    SAMMIE M. GILLISPIE (Name of Person)				
SAMMIE M. GILLISPIC  (Name of Person)  GILLISPIC ENTRAPPLISE LLC  (Firm/Company)  1379 ARBITUS CIRCLE  (Address)  OVIED O. FL. 32765  (City/State and Zip Code)  For further information concerning this matter, please call:  SAM M.GILLISPIC at (407) 413-4776  (Name of Person)  (Area Code & Daytime Telephone Number)  Enclosed is a check for the following amount:  \$25.00 Filing Fee Certificate of Status Certificate of Status & Certificate	The enclosed A	Articles of Dissolution and fee(s) are submitted for filing.		
GILLISPIC ENTEMPRISE LLC  (Firm/Company)  1379 ARBITUS CIRCLE  (Address)  OVIEDO FL 32765  (City/State and Zip Code)  For further information concerning this matter, please call:  SAM H.GILLISPIC at (W7) 419-4776  (Area Code & Daytime Telephone Number)  Enclosed is a check for the following amount:  \$25.00 Filing Fee 30.00 Filing Fee & Certificate of Status & Cert	Please return a	all correspondence concerning this matter to the following:		
GILLISPIC ENTCAPRISC LLC  (Firm/Company)  1379 ARBITUS CIRCLE  (Address)  OVIEDO FL 32765  (City/State and Zip Code)  For further information concerning this matter, please call:  SAM H.GILLISPIC at (407) 419-4776  (Area Code & Daytime Telephone Number)  Enclosed is a check for the following amount:  \$25.00 Filing Fee 30.00 Filing Fee & Certificate of Status & Cer				
GILLISPIC ENTEMPRISE LLC  (Firm/Company)  1379 ARBITUS CIRCLE  (Address)  OVIEDO FL 32765  (City/State and Zip Code)  For further information concerning this matter, please call:  SAM H.GILLISPIC at (W7) 419-4776  (Area Code & Daytime Telephone Number)  Enclosed is a check for the following amount:  \$25.00 Filing Fee 30.00 Filing Fee & Certificate of Status & Cert		SAMMIE M. GILLIEPIE		
GILLISPIC ENTEMPRISE LLC  (Firm/Company)  1379 ARBITUS CIRCLE  (Address)  OVIEDO FL 32765  (City/State and Zip Code)  For further information concerning this matter, please call:  SAM H.GILLISPIC at (W7) 419-4776  (Area Code & Daytime Telephone Number)  Enclosed is a check for the following amount:  \$25.00 Filing Fee 30.00 Filing Fee & Certificate of Status & Cert		(Name of Person)		
1379 ARBITUS CIRCLE (Address)    OVIEDO, FL 32765     (City/State and Zip Code)    For further information concerning this matter, please call:    SAM H.GILLISPIC   at (407) 499-4776     (Name of Person) (Area Code & Daytime Telephone Number)    Enclosed is a check for the following amount:    \$25.00 Filing Fee   30.00 Filing Fee & Certificate of Status Certificate of Status & Certific				
1379 ARBITUS CIRCLE (Address)    OVIEDO, FL 32765     (City/State and Zip Code)    For further information concerning this matter, please call:    SAM H.GILLISPIC   at (407) 499-4776     (Name of Person) (Area Code & Daytime Telephone Number)    Enclosed is a check for the following amount:    \$25.00 Filing Fee   30.00 Filing Fee & Certificate of Status Certificate of Status & Certific		GILLISPIE ENTERPRISE LLC		
OVIEWO FL 32765 (City/State and Zip Code)  For further information concerning this matter, please call:  SAM H.G. ILLISPIC at (407) 499-4776 (Name of Person) (Area Code & Daytime Telephone Number)  Enclosed is a check for the following amount:  \$25.00 Filing Fee 30.00 Filing Fee & Certificate of Status Certificate of Status & Certificate of				
OVIEWO FL 32765 (City/State and Zip Code)  For further information concerning this matter, please call:  SAM H.G. ILLISPIC at (407) 499-4776 (Name of Person) (Area Code & Daytime Telephone Number)  Enclosed is a check for the following amount:  \$25.00 Filing Fee 30.00 Filing Fee & Certificate of Status Certificate of Status & Certificate of		1270 A225 CALL		
OVIEWO FL 32765 (City/State and Zip Code)  For further information concerning this matter, please call:  SAM H.G. ILLISPIC at (407) 499-4776 (Name of Person) (Area Code & Daytime Telephone Number)  Enclosed is a check for the following amount:  \$25.00 Filing Fee 30.00 Filing Fee & Certificate of Status Certificate of Status & Certificate of		(Address)		
For further information concerning this matter, please call:    SAM H.GILLISPIE at (407) 499-4776     (Name of Person) (Area Code & Daytime Telephone Number)    Enclosed is a check for the following amount:   \$25.00 Filing Fee		·		
For further information concerning this matter, please call:    SAM M.GILLISPIE at (407) 489-4776     (Area Code & Daytime Telephone Number)		OVIESO, FL 32765		
SAM M.GILLISPIE at (407) 498-4776  (Name of Person) (Area Code & Daytime Telephone Number)  Enclosed is a check for the following amount:  [\$25.00 Filing Fee  30.00 Filing Fee & Certificate of Status Certificate Of Status & Certificate Of Status		(City/State and Zip Code)		
SAM M.GILLISPIE at (407) 498-4776  (Name of Person) (Area Code & Daytime Telephone Number)  Enclosed is a check for the following amount:  [\$25.00 Filing Fee  30.00 Filing Fee & Certificate of Status Certificate Of Status & Certificate Of Status				
Enclosed is a check for the following amount:  \$\sum_{\text{\$\cupe{25.00 Filing Fee}}} \text{\$\sum_{\text{\$\cupe{25.00 Filing Fee}}}} \$\sum_{\text{\$	For further inf	formation concerning this matter, please call:		
Enclosed is a check for the following amount:  \$\sum_{\text{\$\frac{5}{25.00}}} \text{Filing Fee} \text{ \$\sum_{\text{\$\frac{5}{25.00}}} \text{Filing Fee & \$\sum_{\text{\$\frac{5}{25.00}}} \text{Filing Fee & \$\sum_{\text{\$\frac{5}{25.00}}} \text{Filing Fee & \$\sum_{\text{\$\frac{5}{25.00}}} \text{Filing Fee, \$\sum_{\text{\$\frac{5}{25.00}}} \text{Filing Fee, \$\sum_{\text{\$\frac{5}{25.00}}} \text{Filing Fee, \$\sum_{\text{\$\frac{5}{25.00}}} \text{Certificate of Status & \$\sum_{\text{\$\frac{5}{25.00}}} \text{Filing Fee} \text{ \$\sum_{\text{\$\frac{5}{25.00}}}  \$\sum				
Enclosed is a check for the following amount:  \$\sum_{\text{\$\frac{5}{25.00}}} \text{Filing Fee} \text{ \$\sum_{\text{\$\frac{5}{25.00}}} \text{Filing Fee & \$\sum_{\text{\$\frac{5}{25.00}}} \text{Filing Fee & \$\sum_{\text{\$\frac{5}{25.00}}} \text{Filing Fee & \$\sum_{\text{\$\frac{5}{25.00}}} \text{Filing Fee, \$\sum_{\text{\$\frac{5}{25.00}}} \text{Filing Fee, \$\sum_{\text{\$\frac{5}{25.00}}} \text{Filing Fee, \$\sum_{\text{\$\frac{5}{25.00}}} \text{Certificate of Status & \$\sum_{\text{\$\frac{5}{25.00}}} \text{Filing Fee} \text{ \$\sum_{\text{\$\frac{5}{25.00}}}  \$\sum		SAM M. GILLISPIE at (407) 488-4776		
\$25.00 Filing Fee & S55.00 Filing Fee & Certificate of Status Certificate of Status & Certificate of S		(Name of Person) (Area Code & Daytime Telephone Number)		
\$25.00 Filing Fee & S55.00 Filing Fee & Certificate of Status Certificate Of Status & Certificate Of S				
Certificate of Status Certified Copy Certificate of Status &	Enclosed is a ch			
	\$25.00 Filing			
(additional copy is enclosed		(additional copy is enclosed) Certified Copy		

#### 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

### FILED

2009 MAY 14 PM 2: 56

SECRETARY OF STATE
TABLAHASSEE. FLORIDA

1. The name of a limited liability company is	TAELAHASSEE, FLORID
	nisos LLC.
2. The Articles of Organization were filed on FEBURA  LOUDE 11388	and assigned document number
3. The date the dissolution was approved:	1,2009.
4. A description of occurrence that resulted in the limited lia 608.441, Florida Statutes, (copy 608.441 on back cover le	bility company's dissolution pursuant to section etter).
THENE IS NO CURRANT BUSH	NESS THAT REQUIRES THE
LLC TO STAY ACTIVE.	
5. CHECK ONE:	
All debts, obligations and liabilities of the limited	obligations and liabilities pursuant to s. 608.4421.
7. CHECK ONE:	
There are no suits pending against the company i	n any court.
OR- Adequate provision has been made for the satisfa entered against it in any pending suit.	ction of any judgment, order or decree which may be
Signatures of the members having the same percentage of mem	bership interests necessary to approve the dissolution:
Signature .	Printed Name
M GUL	SAMMIG M. GILLISPIG