

LO4 000030544

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

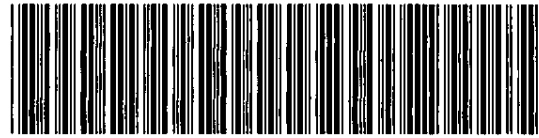
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. CLINE

MAR 25 2008

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: HITZCO # 2, 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:

SHEILA HANDLER

(Name of Person)

HITZCO # 2, LLC

(Firm/Company)

6425 VIA ROSA

(Address)

BOCA RATON, FL 33433

(City/State and Zip Code)

For further information concerning this matter, please call:

SHEILA HANDLER

(Name of Person)

at (561) 416-6066

(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)

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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**ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is
HITZCO # 2, LLC

2. The Articles of Organization were filed on 04/21/2004 and assigned document number
L04000030544

3. The date the dissolution was approved: JAN 1, 2008

4. 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).
HITZCO # 2, LLC upon discussion and agreement of all members, in accordance with it's operating agreement
takes into account that it has not conducted nor contemplates any new business, hereby dissolves the LLC

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 section 608.441.

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.
-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
Sheila Handler
Gary Hitzig
Arlene Schiller

Printed Name

SHEILA HANDLER

GARY HITZIG

ARLENE SCHILLER

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CLERK OF STATE
TALLAHASSEE, FLORIDA