L04000038654

| (Re | questor's Name) | | |
|---|-------------------|-----------|--|
| (Ad | dress) | | |
| (Ad | dress) | | |
| . (Cit | y/State/Zip/Phone | · #) | |
| PICK-UP | WAIT | MAIL | |
| (Bu | siness Entity Nam | ne) | |
| (Document Number) | | | |
| Certified Copies | _ Certificates | of Status | |
| Special Instructions to Filing Officer: | | | |
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OR IIIN 13 PH 4: 12

J. BRYAN

JUN 16 2008

EXAMINER



april 2008 Division of Corporations To lehow it may concern: My Company nome is GLOBAL FINANCIAL NETWORK LIC Ord my nome is ALICIA H SUMMERS President of G. F. N. Jon requesting a Dessolution get. Be awone of Change of address: 3800 NORTH JOB ROAD # 202 WEST PALM BEACH FLORIDA 33411 My Cell # 561- 371-3627 Thank You Sincerely

alien M Dunners

P5: 12-31-2007 Dissalution THANK YOU



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 5, 2008

ALICIA SUMMERS GLOBAL FINANCIAL NETWORK, INC. 12230 FOREST HILL BLVD STE 1102 WEST PALM BEACH, FL 33414

SUBJECT: GLOBAL FINANCIAL NETWORK, LLC

Ref. Number: L04000038654

We have received your document for GLOBAL FINANCIAL NETWORK, 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):

You completed the wrong form

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

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) 245-6043.

Letter Number: 508A00028529

Joey Bryan Regulatory Specialist II OR JUH 13 PH 4: 12

COVER LETTER

| TO: Registration Section Division of Corpo | | | | | |
|--|--|---|--|--|--|
| SUBJECT: | O LOBAL HNA (Name of L | INCIAC NETWORK Limited Liability Company) | ис | | |
| The enclosed Articles of Dissolution and fee(s) are submitted for filing. | | | | | |
| Please return all correspon | dence concerning this matte | er to the following: | | | |
| | ALICIA M. S | Name of Person) | DIVISION 08 JUI | | |
| | | (Firm/Company) | W 13 | | |
| (Name of Person) (Name of Person) (Firm/Company) (Firm/Company) (Address) (Address) | | | | | |
| WELLINGTON, FL 33414 (City/State and Zip Code) | | | | | |
| For further information concerning this matter, please call: | | | | | |
| | (Name of Person) | at () | : Telephone Number) | | |
| Enclosed is a check for the fo | ollowing amount: | | | | |
| s25.00 Filing Fee - Fles were about | 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) | | |
| * VMS WM W. | -Oproor | | | | |
| Registr Divisio P.O. Bo | ration Section on of Corporations ox 6327 assee, 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 | P |
|---|---|
| GLOBAL FINANCIAL NETWOR | K, LLC |
| 2. The Articles of Organization were filed on | and assigned document number |
| 3. The date the dissolution was approved: 310 | 1 |
| 4. A description of occurrence that resulted in the limited liabilities 608.441, Florida Statutes, (copy 608.441 on back cover letter | |
| Went out of Dusiness - No more clien | 15, |
| | |
| 5. CHECK ONE: | |
| All debts, obligations and liabilities of the limited lia OR- Adequate provision has been made for the debts, obligations | |
| All remaining property and assets have been distributed amor rights and interests. | ng its members in accordance with their respective |
| 7. CHECK ONE: | |
| There are no suits pending against the company in ar OR- Adequate provision has been made for the satisfactio entered against it in any pending suit. | |
| Signatures of the members having the same percentage of members | hip interests necessary to approve the dissolution: |
| Signature | Printed Name |
| Clien M Summes | ALICIA M. SUMMERS |
| | |
| | • |
| | |
| | |

FILING FEE: \$25.00