L04000053166

(Requestor's Name)
(Address)
, ,
(Address)
(Address)
(City/State/Zip/Phone #)
<u> </u>
PICK-UP WAIT MAIL
(Business Entity Name)
L04-53166
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:



400075824284

06/12/06--01066--014 **30.00

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06 JUL 12 AH 8: 19

SECRETARY OF STATE
TAIT AHASSEE, FLORIDA

COVER LETTER

TO: Registration Section Division of Corporations
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SUBJECT: BAITIN SWITCH LLC
SUBJECT: OAT OWN CHECK
(· · · · · · · · · · · · · · · · · · ·
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
PAR USDESSAGOS TI
(Name of Person)
BAIT'N SWITCH LLC (Firm/Company)
(Firm/Company)
73 COQUINA RIDGE WAY
(Address)
0 - 0 P.00 M P. 201-11
(City/State and Zid Code)
(City/State and 2/19 Code)
For further information concerning this matter, please call:
D 57 57 100 001 5310
(Name of Person) at (425) 391-5313 (Area Code & Daytime Telephone Number)
(Name of Person) (Area Code & Daytime Persphore Number)
Englaced is a check for the following amount:
Enclosed is a check for the following amount:
☐ \$25.00 Filing Fee & ☐ \$60.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status &
(additional copy is enclosed) 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



June 14, 2006

PAUL WOESSNER II 73 COQUINA RIDGE WAY ORMOND BEACH, FL 32174

SUBJECT: BAIT'N SWITCH LLC Ref. Number: L04000053166

We have received your document for BAIT'N SWITCH 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):

Complete #3 of the Articles of Dissolution. That date must be before 6/12/06.

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) 245-6067.

Letter Number: 606A00040393

Neysa Culligan Document Specialist

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

ARTICLES OF DISSOLUTION EQ. (1) A LIMITED LIABILITY COMPANY

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FILED 06 JUL 12 AM 8: 20 The name of a limited liability company is SECRETARY DE STATI 2. The Articles of Organization were filed on and assigned document number L04000053166 3. The date the dissolution was approved: 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). Cer iso 5. CHECK ONE: All debts, obligations and liabilities of the limited liability company have been paid or discharged. ☐ 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 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: Printed Name Signature mssess was I

FILING FEE: \$25.00