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EXAMINER



COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT: Ron Schulte and Associates	强二
(Name of Limited Liability Company)	EB 28
The enclosed Articles of Dissolution and fee(s) are submitted for filing.	SEFOR 2
Please return all correspondence concerning this matter to the following:	FLORID
Ronald Schulte	*** *
(Name of Person)	
Ron Schulte and Associates	
(Firm/Company)	
4579 Cardinal Cove Lane	
(Address)	
Naples FL 34114	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
Ron Schulte _{at (} 239) 775 1733	
(Name of Person) (Area Code & Daytime Telephone Numb	er)
Enclosed is a check for the following amount:	
\$25.00 Filing Fee 30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	Status &

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

The name of a limited liability company is Ron Schulte and Associates	ASSEE OF PA
2. The Articles of Organization were filed on	29/2004 and assigned document multiple re
3. The date the dissolution was approved: February	25, 2011
4. A description of occurrence that resulted in the limited 608.441, Florida Statutes, (copy 608.441 on back coveretirement	d liability company's dissolution pursuant to section
OR-Adequate provision has been made for the del	hited liability company have been paid or discharged. bts, obligations and liabilities pursuant to s. 608.4421. ed among its members in accordance with their respective
There are no suits pending against the compar	
entered against it in any pending suit.	isfaction of any judgment, order or decree which may be
Signatures of the members having the same percentage of m	embership interests necessary to approve the dissolution:
Signature Kovald Tediulte	Printed Name ROWALD F SCHULTE
	·

FILING FEE: \$25.00