

L05000000963

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

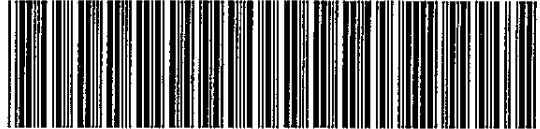
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

L05-963

Office Use Only



900058520009

08/24/05--01007--005 \*\*30.00

2005 AUG 31 AM 9:31  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

gm



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

August 19, 2005

DAVID J. LAGOE  
1721 KERSLEY CIRCLE  
LAKE MARY, FL 32746

SUBJECT: THE TEAM LLC  
Ref. Number: L05000000963

We have received your document for THE TEAM 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):

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) 245-6890.

Jason Merrick  
Document Specialist

Letter Number: 105A00052846

*Completed  
Forms & check  
enclosed*

2005 AUG 31 AM 9:31  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

## TRANSMITTAL LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: The Team, 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:

David J Lagor  
(Name of Person)

(Firm/Company)

1721 Kersley Circle  
(Address)

Lake Mary, FL 32746  
(City, State and Zip Code)

For further information concerning this matter, please call:

David J. Lagor at ( 904 ) 804 9703  
(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

☐ \$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☐ \$60.00 Filing Fee &  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

**STREET ADDRESS:**  
Registration Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, Florida 32399

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

2005 AUG 31 AM 9:31  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

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

1. The name of the limited liability company is

The Teams LLC

2. The date the dissolution was approved: August 8, 2005

3. A description of the occurrence that resulted in the limited liability company's dissolution pursuant to section 608.441, Florida Statutes, (copy of 608.441 on back of cover letter).

The company never conducted business  
AND all members gave written consent  
to dissolve the company.

4. **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 s. 608.4421.

5. All remaining property and assets have been distributed among its members in accordance with their respective rights and interests.

6. **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

Typed or Printed name

David J. Lago  
Mary Jo Lago

DAVID J. LAGO  
MARY JO LAGO

FILED  
2005 AUG 31 AM 9:31  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA