

L05000020369

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

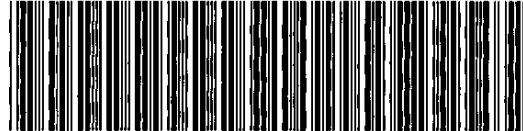
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TALLAHASSEE, FLORIDA



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032  
REFERENCE : 538647 81093A  
AUTHORIZATION : *[Signature]*  
COST LIMIT : \$ 25.00

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06 OCT 19 PM 4:51  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ORDER DATE : October 19, 2006  
ORDER TIME : 12:52 PM  
ORDER NO. : 538647-015  
CUSTOMER NO: 81093A

DOMESTIC FILINGS

NAME: OPUS 9 ENTERPRISES III, LLC

XX ARTICLES OF DISSOLUTION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX        PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Debbie Skipper - EXT# 2948

EXAMINER'S INITIALS: \_\_\_\_\_

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

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TALLAHASSEE, FLORIDA

1. The name of a limited liability company is  
**OPUS 9 ENTERPRISES III, LLC**

2. The Articles of Organization were filed on **February 28, 2005** and assigned document number  
**L05000020369**

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).

**Written consent of all of the Members of 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 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.  
-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  
  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Printed Name  
**Steven P. Fischer**  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_