

L 05000039800

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

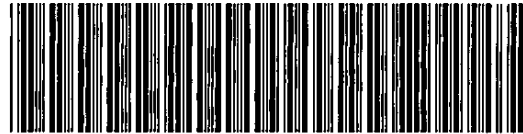
(Document Number)

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

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L05-39800

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07/03/06--01024--007 \*\*43.75

FILED

06 AUG - 7 PM 12:00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Dissolvement of AR Distributing LLC

**DOCUMENT NUMBER:** FEIN# 20-2616434 Cert# 16-8013286743-1

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Anthony Roman

(Name of Contact Person)

AR Distributing LLC

(Firm/Company)

1333 SW 151 Way

(Address)

Sunrise, FL 33326

(City/State and Zip Code)

For further information concerning this matter, please call:

Anthony Roman

(Name of Contact Person)

at ( 954 ) 793-9548

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☐ \$35 Filing Fee    ☒ \$43.75 Filing Fee & Certificate of Status    ☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)    ☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)

**MAILING ADDRESS:**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET ADDRESS:**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

06 AUG -7 PM 12:01

FILED



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 12, 2006

ANTHONY ROMAN  
1333 SW 151 WAY  
SUNRISE, FL 33326

SUBJECT: AR DISTRIBUTING LLC  
Ref. Number: L05000039800

We have received your document for AR DISTRIBUTING LLC and your check(s) totaling \$43.75. 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) 245-6097.

Marsha Thomas  
Document Specialist

Letter Number: 406A00044804

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

06 AUG - 7 PM 12:00

FILED

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

1. The name of a limited liability company is

AR Distributing LLC

2. The Articles of Organization were filed on 4/2005 and assigned document number

16-8013286743-1

3. The date the dissolution was approved: ? ~~4/2005~~ ~~5/2005~~ 01/01/2006

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).

No events

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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.

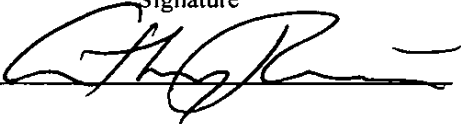
6. All remaining property and assets have been distributed among its members in accordance with their respective rights and interests.

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

Anthony Roman