

L05000041383

(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:

L. SELLERS

SEP 19 2011

EXAMINER

Office Use Only



600211802646

09/15/11--01004--021 **25.00

RECEIVED
SEP 16 2011

SEP 16 3:17

FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: A.C.T. ENTERPRISES, 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:

BARBARA ANSON
(Name of Person)

(Firm/Company)

40451 S.R. 70 EAST
(Address)

MYAKKA CITY, FL 34251
(City/State and Zip Code)

For further information concerning this matter, please call:

BARBARA ANSON at (941) 737-7059
(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)

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

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 301 PARTNERS, 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:

BARBARA ANSON
(Name of Person)

(Firm/Company)

40451 S.R. 70 EAST
(Address)

MYAKKA CITY, FL 34251
(City/State and Zip Code)

For further information concerning this matter, please call:

BARBARA ANSON at (941) 737-7059
(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)

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