# L05000079908

(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

AUG \_\_ 7 2009

**EXAMINER** 

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SECRETARY OF STATE
AND ASSEE FLORIE

### **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: An palorcost, 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. Sweeney (Name of Person)
(Firm/Company)
9777 Wilshire Lakes Blud.  (Address)
Noples, FL 34109 (City/State and Zip Code)
For further information concerning this matter, please call:
Stephanie L. Sweeney at (239) 254-8698 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed)  \$25.00 Filing Fee & Section 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

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

## FILED

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		US AUG TO RIT 44 UB
1. The name of a limited liability company is		SECRETARY OF STATE
Anpabrost	<u>, LLC</u>	TALLAHASSEE FLORIDA
2. The Articles of Organization were filed on Augu-	ust 15, 200	5 and assigned document number
		_
3. The date the dissolution was approved: Aug	·	
4. A description of occurrence that resulted in the limite 608.441, Florida Statutes, (copy 608.441 on back cov		's dissolution pursuant to section
Written consent of all m	<u>rembers</u>	
5. CHECK ONE:		
All debts, obligations and liabilities of the lin	nited lighility comn	any have been paid or discharged
OR- Adequate provision has been made for the de		
<b>—</b> ' '		•
<ol><li>All remaining property and assets have been distribut rights and interests.</li></ol>	ed among its memo	ers in accordance with their respective
7. CHECK ONE:		•
There are no suits pending against the compa	any in any court.	
OR- Adequate provision has been made for the sa		dement order or decree which may be
entered against it in any pending suit.	misiastion of any ju-	aginomi, order or decree without many or
		·
gnatures of the members having the same percentage of r	nembership interest	ts necessary to approve the dissolution:
Signature		Printed Name
A l A Rasa		
January according	<u> </u>	avid J. Sweeney
Atalan : L Daga	Sı	ephanie L. Sweener
Sold and the second		-
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