

L05000082250

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

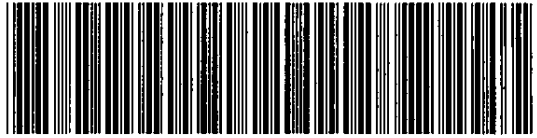
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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08/03/09--01063--013 **30.00

FILED
2009 AUG -3 PM 2:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. LEWIS

AUG - 4 2009

EXAMINER

To whomever it may concern,

I, Sheldon Hamilton and Jason Hamilton want to dissolude our Casco Enterprises, LLC,

My phone number is

781-936-8182 home

781-936-8014 work

My Return Address is

Sheldon Hamilton

9 Bristol Drive

Duxbury, MA 02332

Thank you!

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Casco Enterprises, LLC
(Name of Limited Liability Company)

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Sheldon Hamilton
(Name of Person)

Casco Enterprises, LLC
(Firm/Company)

9 Bristol Dr.
(Address)

Duxbury MA 02332
(City/State and Zip Code)

For further information concerning this matter, please call:

Sheldon Hamilton
(Name of Person)

at (781) 936-8014
(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

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

FILED

2009 AUG -3 PM 2: 50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is

Casco Enterprises, LLC

2. The Articles of Organization were filed on August 19, 2005 and assigned document number

L05000082250

3. The date the dissolution was approved: 7-31-09

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).

Business Closed

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

Sheldon Hamilton
Jason S Hamilton

Printed Name

Sheldon Hamilton
JASON S HAMILTON