

WS 0000 89814

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

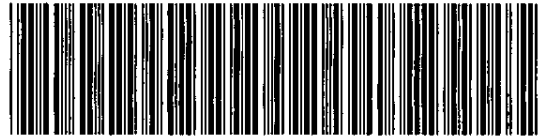
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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T. CLINE

FEB 10 2009

EXAMINER



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 27, 2009

ROBERT POGGIO  
3420 45TH STREET BAYS 18-20  
WEST PALM BEACH, FL 33407

SUBJECT: A & B CUSTOM COUNTERS, LLC  
Ref. Number: L05000089816

We have received your document for A & B CUSTOM COUNTERS, LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Number three of the document must contain the date the decision to dissolve was approved or became effective. This date must be prior to the date the document was submitted for filing.

Please return your document, along with a copy of this letter, within 60 days your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline  
Regulatory Specialist II

Letter Number: 409A00002943

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TALLAHASSEE, FLORIDA

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** A&B CUSTOM COUNTERS 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:

ROBERT J POGGIO

(Name of Person)

A&B CUSTOM COUNTERS, LLC.

(Firm/Company)

3420 45TH STREET BAYS 18-20

(Address)

WEST PALM BEACH, FLORIDA 33407

(City/State and Zip Code)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

ROBERT J POGGIO

(Name of Person)

at ( 561 ) 308-1891

(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**

1. The name of a limited liability company is  
**A&B CUSTOM COUNTERS, LLC.**

2. The Articles of Organization were filed on 9/13/2005 and assigned document number  
**L05000089816**

3. The date the dissolution was approved: ~~2/1/2009~~ 1/23/09

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).

**THE ECONOMIC TIMES, SHORTAGE OF PROFITABLE WORK**

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**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.

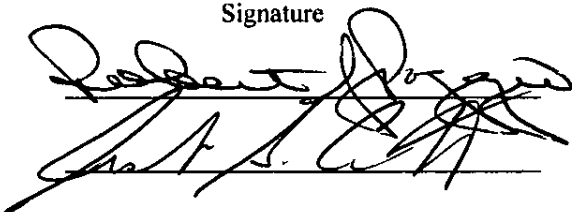
**7. CHECK ONE:**

- ☒ 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



**ROBERT J POGGIO**

**ANDREW CANTATORE**

**FILING FEE: \$25.00**