# LOS 000/05157

(Requestor's Name)		
(Address)		
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(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
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09 MAR 12 PM 1:5

SECRETARY OF STATE DIVISION OF CORPORATION

T. HAMPTON

MAR 1 3 2009

EXAMINER

# **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: Ansalom (CC) (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:		
Sandy D. Farmer  (Name of Person)		
(Firm/Company)  809 E. Browning dale are.  (Address)  (City/State and Zip Code)		
For further information concerning this matter, please call:  Sumulation Angles (Name of Person)  (Name of Person)  (Area Code & Daytime Telephone Number)		
\$25.00 Filing Fee 30.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed)  \$25.00 Filing Fee & 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



### RECEIVED

09 MAR 12 PM 4:00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

February 27, 2009

SANDY D FARMER 809 E BLOOMINGDALE AVE BRANDON, FL 33511

SUBJECT: ANSALON LLC Ref. Number: L05000105157

We have received your document for ANSALON LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

Please return the corrected original and one copy of 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) 245-6855.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 009A00006948

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

# ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY 09 MAR 12 PM 1: 57

1. The name of a limited liability company is	
2. The Articles of Organization were filed on	and assigned document number
3. The date the dissolution was approved: $\frac{10-31}{2}$	<u>-08</u>
4. A description of occurrence that resulted in the limited li 608.441, Florida Statutes, (copy 608.441 on back cover (e08,441 Cc) com while members of the finite.	
5. CHECK ONE:  All debts, obligations and liabilities of the limite	ed liability company have been paid or discharged.
—-OR-	s, obligations and liabilities pursuant to s. 608.4421.
6. All remaining property and assets have been distributed rights and interests.	among its members in accordance with their respective
7. CHECK ONE:	
There are no suits pending against the company -OR- Adequate provision has been made for the satisf entered against it in any pending suit.	in any court.  faction of any judgment, order or decree which may be
Signatures of the members having the same percentage of mer	nbership interests necessary to approve the dissolution:
Signature /	Printed Name SANdy D. Falmer
MATERIA DE LA CONTRACTION DE L	Knistaffer Farmer