# L06000012547

| (Re                                     | equestor's Name)   |             |
|-----------------------------------------|--------------------|-------------|
| -                                       |                    |             |
| (Ad                                     | ldress)            |             |
| (Ad                                     | ldress)            |             |
| - (Cit                                  | ty/State/Zip/Phone | e #1        |
| (City/State/Zip/Phone #)                |                    |             |
| PICK-UP                                 | ☐ WAIT             | MAIL        |
|                                         |                    |             |
| (Bu                                     | ısiness Ëntity Nar | ne)         |
| (Dr                                     | ocument Number)    |             |
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| Certified Copies                        | _ Certificates     | s of Status |
| Consist Instructions to                 | Filing Officer     |             |
| Special Instructions to Filing Officer: |                    |             |
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SECRETARY OF STATE

N. Oelka

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### **COVER LETTER**

| TO: Registration Section Division of Corporations                                                                                                                                                       |        |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| SUBJECT: Lopez Accounting & Bookkeeping, Ilc                                                                                                                                                            |        |
| (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:                                                                                                                               |        |
| Louis D. Lopez                                                                                                                                                                                          |        |
| (Name of Person)                                                                                                                                                                                        |        |
| Lopez Accounting & Bookkeeping, Ilc                                                                                                                                                                     |        |
| (Firm/Company)                                                                                                                                                                                          |        |
| 724 Holmes Ave.                                                                                                                                                                                         |        |
| (Address)                                                                                                                                                                                               |        |
| Inverness, FL 34450                                                                                                                                                                                     |        |
| (City/State and Zip Code)                                                                                                                                                                               |        |
| For further information concerning this matter, please call:                                                                                                                                            |        |
| Louis D. Lopez <sub>at (</sub> 352 <sub>)</sub> 726-3431                                                                                                                                                |        |
| (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)  \$60.00 Filing Fee, Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed) | losed) |

#### 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 07 JAN -8 PM 1:43

, J. 1.

| 1. The name of a limited liability company is LOPEZ ACCOUNTING & BOOKKEEF                                                                            | SECRETARY OF STATE TALLAHASSEE, FLORIDA                   |
|------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|
| 2. The Articles of Organization were filed on 12/31/0 L06000012547                                                                                   | and assigned document number                              |
| 3. The date the dissolution was approved: 12/31/06                                                                                                   | ·                                                         |
| 4. A description of occurrence that resulted in the limited 608.441, Florida Statutes, (copy 608.441 on back cove Discontinued doing business due to |                                                           |
| · · · · · · · · · · · · · · · · · · ·                                                                                                                |                                                           |
| 5. CHECK ONE:                                                                                                                                        |                                                           |
| -OR-                                                                                                                                                 | ited liability company have been paid or discharged.      |
| <del>_</del> · ·                                                                                                                                     | ots, obligations and liabilities pursuant to s. 608.4421. |
| 6. All remaining property and assets have been distribute rights and interests.                                                                      | d among its members in accordance with their respective   |
| 7. CHECK ONE:                                                                                                                                        |                                                           |
| There are no suits pending against the compar                                                                                                        |                                                           |
| Adequate provision has been made for the sati<br>entered against it in any pending suit.                                                             | isfaction of any judgment, order or decree which may be   |
| Signatures of the members having the same percentage of m                                                                                            | embership interests necessary to approve the dissolution: |
| signature,                                                                                                                                           | Printed Name                                              |
| July Tapla                                                                                                                                           | Louis D. Lopez                                            |
|                                                                                                                                                      |                                                           |
|                                                                                                                                                      |                                                           |
|                                                                                                                                                      |                                                           |
|                                                                                                                                                      |                                                           |
|                                                                                                                                                      |                                                           |