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| (Re | equestor's Name) | |
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| (Cit | ty/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Nar | ne) |
| (Do | cument Number) | |
| Certified Copies | _ Certificates | s of Status |
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SCURETARY OF STATE
PALLAHASSEE FLORIG

D. BRUCE

APR 3 0 2010

EXAMINER

COVER LETTER

| | gistration Section vision of Corporations | | | |
|-----------------------|---|--|--------------|---|
| SUBJECT: | COLORITE L.L.C. | | | |
| SOBJECT. | (Name of Limited Liability Company) | | | |
| | | , | | |
| The enclose | d Articles of Dissolution and fee(s) are submitted for filing. | | | |
| Please return | n all correspondence concerning this matter to the following: | | | |
| | KENNETH LOVE (Name of Person) | - | | • |
| | COLORHE L.L.C. | | | |
| | 1880 LOCUSHYPL LOOP (Address) | | | |
| | | | 5 | |
| | OCOER, Fl. 34761 (City/State and Zip Code) | 選出 | APR. | |
| | (City/State and 21p Code) | 388 Y88 | 29 | |
| For further i | information concerning this matter, please call: | मुंभ | T. | |
| | KRNNR+ Love at (321-) 663-545 (Name of Person) (Area Code & Daytime Telephone Numb | STATE OF THE STATE | 3.2 5 | ٦ |
| | | · | | |
| / | check for the following amount: | _ | | |
| ∑ \$25.00 Fili | ng Fee 30.00 Filing Fee & \$55.00 Filing Fee & \$60.00 Filing Certificate of Status Certified Copy Certificate of Status (additional copy is enclosed) Certified Copy (additional copy is enclosed) | Status & | æd) | |
| | | | | |
| (| MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDR Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 | ESS: | | |



· ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

| 1. The name of a limited liability company is COLOTZI + L.L.C. |
|--|
| 2. The Articles of Organization were filed on FEB 6, 2006 and assigned document number L0600012619 |
| 3. The date the dissolution was approved: 4 9 10 |
| 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). |
| Loss of work due to the economy. Loss of customers due to the economy. |
| 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 Hie dissolution |
| Signature Printed Name Printed Name |
| Lisa Love |
| |
| |

FILING FEE: \$25.00

