

LOG 000040664

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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500241784645

11/19/12--01008--002 **25.00

EFFECTIVE DATE 12/31/2012

FILED
12 NOV 19 PM 2:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

EFFECTIVE DATE

12/31/2012

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

November 16, 2012

State of Florida
Registration Section
Division of Corporations
PO Box 6327
Tallahassee FL 32314

Subject: Dissolution of Store Distribution LLC.
Document Number L06000040664.

Dear Sir or Madam:

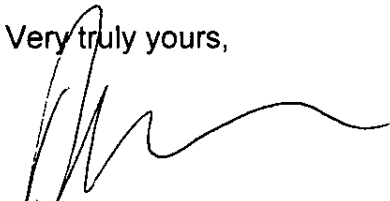
The enclosed Articles of Dissolution and Notice of Corporate Dissolution are submitted for filing. Please return all correspondence to the following:

Peter Saltz
17062 Newport Club Dr
Boca Raton, FL 33496

For further information on this matter, please call the above named person at 561 998 7182.

Enclosed is a check for \$25 for the filing fee.

Very truly yours,



Peter Saltz

ARTICLES OF DISSOLUTION

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- FIRST: The name of the limited liability company is Store Distribution LLC;
- SECOND: The articles of organization were filed on April 19, 2006 and assigned document number L06000040664;
- THIRD: The dissolution was approved on November 16, 2012. The effective date of dissolution is December 31, 2012.
- FOURTH: Dissolution was approved by all Members at a meeting of the Members on November 16, 2012;
- FIFTH: Adequate provision has been made for all debts, obligations and liabilities pursuant to s 608.4421;
- SIXTH: All remaining property has been distributed among the members in accordance with their rights and interest;
- SEVENTH: There are no suits pending against the company in any court.

Signed this 16th day of November 2012.

Signature: _____

Peter Saltz
Managing Member

EFFECTIVE DATE 12/31/2012

Notice of Corporate Dissolution

This notice is submitted by the dissolved limited liability corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

Name of Corporation: Store Distribution LLC

Date of dissolution: December 31, 2012

Description of information that must be included in a claim:

1. Name and address of the company submitting claim and the contact person and phone number;
2. Date(s) of and description of the service(s) or product(s) supplied to Edition Plus LLC.
3. Copy of any and all invoice(s) previously provided to Store Distribution LLC covering the claim.

Mailing address where claims can be sent:

Peter Saltz
2901 Clint Moore Rd
PMB #220
Boca Raton FL 33496

A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Peter Saltz
Printed Name of the Person Filing


Signature

EFFECTIVE DATE 12/31/2012

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA