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(Re	equestor's Name)			
(Ad	ldress)			
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(Cit	ty/State/Zip/Phone	<u>. #)</u>		
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DR

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COVER LETTER

	ion Section of Corporations		
SUBJECT: Sit	mple Accounting Soluti	ions, LLC	
	(Name of L	imited Liability Company)	
	cles of Dissolution and fee(s) are sul	-	
5	Stacy Tertan		
_		(Name of Person)	
Simple Accounting Solutions, LLC		07 SEC	
(Firm/Company)		- AH)	
	10901 NW 14th Street	#436	755 12
-		(Address)	
1	Plantation/FL 33322		PH 12: 12 OF STATE E. FLORIO
.		y/State and Zip Code)	
For further inform	nation concerning this matter, please	call:	
Bo Ko	penig	at (310) 903-0085	
*********	(Name of Person)	(Area Code & Daytime Teleph	one Number)
Enclosed is a check	for the following amount:		
\$25.00 Filing Fee	30.00 Filing Fee & Certificate of Status	Certified Copy Cert (additional copy is enclosed) Cert	60.00 Filing Fee, ificate of Status & ified Copy litional copy is enclosed)
	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	STREET/COURIER Registration Section Division of Corporation Clifton Building 2661 Executive Cente	ons

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

2. The Articles of Organization were filed on 6/22/0 L06000063788 3. The date the dissolution was approved: 09/20/20	
	207
	J07
4. A description of occurrence that resulted in the limits 608.441, Florida Statutes, (copy 608.441 on back co	ed liability company's dissolution pursuant to section
The business partners are no longe	r geographically located together.
	FCC LL.
	A C
	SSE 2
5. CHECK ONE:	
— -OR-	imited liability company have been paid or declarged
]Adequate provision has been made for the d	lebts, obligations and liabilities pursuant to s. 608.4421.
All remaining property and assets have been distriburights and interests.	ited among its members in accordance with their respective
7. CHECK ONE:	
There are no suits pending against the comp	any in any court
OR-	atisfaction of any judgment, order or decree which may be
gnatures of the members having the same percentage of	membership interests necessary to approve the dissolution:
Signature	Printed Name
De	Stacy Tertan
B	Bo Koenig