

W06000 104274

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

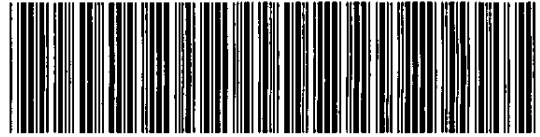
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



800138384718

12/04/08--01011--009 \*\*25.00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

29 DEC - 4 AM 10: 37

FILED

M. THOMAS

DEC - 5 2008

EXAMINER

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** G.F. Financial Recovery LLC  
(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:

Kimberly A. Bosen  
(Name of Person)  
G.F. Financial Recovery LLC  
(Firm/Company)  
P.O. Box 13616  
(Address)  
St. Pete, FL 33733  
(City/State and Zip Code)

For further information concerning this matter, please call:

Kim Bosen at (727) 560-0600  
(Name of Person) (Area Code & Daytime Telephone Number)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

99 DEC -4 AM 10:37

FILED

Enclosed is a check for the following amount:

- \$25.00 Filing Fee
- 30.00 Filing Fee & Certificate of Status
- \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$60.00 Filing Fee, Certificate of Status & 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

**ARTICLES OF DISSOLUTION  
FOR  
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is

G.F. Financial Recovery Llc

2. The Articles of Organization were filed on 10/25/06 and assigned document number

L06000104274

3. The date the dissolution was approved: 11/16/08

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).

Business was not profitable, costing more to continue running office, than the business was bringing in.

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.

09 DEC 14 AM 10:37  
FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Signatures of the members having the same percentage of membership interests necessary to approve the dissolution:

Signature

Printed Name

Kimberly A. Boser  
Theresa K. Wallace

11/16/08 Kimberly A. Boser  
11/11/08 Theresa K. Wallace