

LD0000116126

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

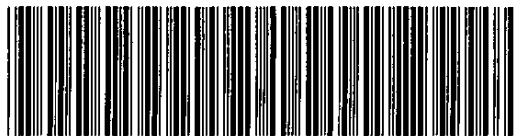
Special Instructions to Filing Officer:

L. SELLERS

JAN 31 2008

EXAMINER

Office Use Only



400115136094

01/16/08--01022--014 **35.00

FILED
2008 JAN 30 AM 3:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ORLANDO RIDES 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:

CRAIG C. MAGUIRE
(Name of Person)

ORLANDO RIDES LLC
(Firm/Company)

1800 Pepperidge Dr.
(Address)

Orlando, FL 32806
(City/State and Zip Code)

For further information concerning this matter, please call:

CRAIG C. MAGUIRE at (407) 222-0575
(Name of Person) (Area Code & Daytime Telephone Number)

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)

\$ 35.00 Twenty Five

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 18, 2008

CRAIG C. MAGUIRE
1800 PEPPERIDGE DR.
ORLANDO, FL 32806

SUBJECT: ORLANDO RIDES, LLC
Ref. Number: L06000116126

We have received your document for ORLANDO RIDES, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a corporation, but your entity is a limited liability company. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Leslie Sellers
Regulatory Specialist II

Letter Number: 308A00004133

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

FILED

2008 JAN 30 AM 3:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is

ORLANDO RIOS LLC

2. The Articles of Organization were filed on UNKNOWN and assigned document number

UNKNOWN

3. The date the dissolution was approved: 4-1-07

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).

NEVER COMMENCED BUSINESS

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 the dissolution:

Signature

Printed Name



CRAIG C. MAGUIRE

FILING FEE: \$25.00

\$ 35. - Already paid