# W70000241892

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
(City/State/Ztp/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
(Document Number)	
Certified Copies Certificates of Status	

Special instructions to Filing Officer:

).

L. SELLERS

MAR - 5 2010

**EXAMINER** 

Office Use Only



800170964498

03/04/10--01016--003 \*\*25.00

10 MAR -4 PH 3: 47
SECRETARY OF STATE

# **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: CUSTOM ARTS W. 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:
JUDY EIDGE (Name of Person)
N/A
(Firm/Company)
2629 BRITANNIA RD (Address)
(Address)
SARASOTA, FL 34231 (City/State and Zip Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
Name of Person) at (94) 266-0108 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee Certificate of Status  S55.00 Filing Fee & Certified Copy (additional copy is enclosed)  \$60.00 Filing Fee, Certified Copy (additional copy is enclosed)
MAILING ADDRESS. CTREET/COURIED ADDRESS.

## MAILING ADDRESS:

هيال ۽ ل

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

4.34

1. The name of a limited liability company  CUSTOM ARTS C	
2. The Articles of Organization were filed on L07000024692	
<ul> <li>3. The date the dissolution was approved:</li></ul>	1/1/2010  I the limited liability company's dissolution pursuant to section in back cover letter).
OR- Adequate provision has been mad	es of the limited liability company have been paid or discharged. The for the debts, obligations and liabilities pursuant to s. 608.4421. The distributed among its members in accordance with their respective
7. CHECK ONE:  There are no suits pending against -OR- Adequate provision has been mad entered against it in any pending s	e for the satisfaction of any judgment, order or decree which may be
Signatures of the members having the same perc	entage of membership interests necessary to approve the dissolution:
Signature Vudy Eidge	Printed Name  JUDY EIDGE
	SECRETARY OF TALLAHASSEE
	FILING FEE: \$25.00