

LO7000042640

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

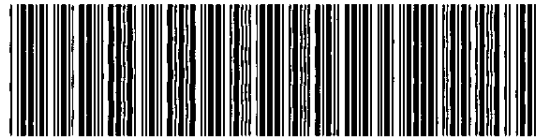
(Document Number)

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09 FEB 19 AM 11:13  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

D. BRUCE

FEB 19 2009

EXAMINER

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Custom Wood furniture  
(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:

Reginald E. GRAFT  
(Name of Person)

Custom Wood Furniture  
(Firm/Company)

650 SE 30 Ave  
(Address)

Tallah. Florida 34471  
(City/State and Zip Code)

For further information concerning this matter, please call:

Reginald E. Graft at ( 352 ) 425-1513  
(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)

CK 3916 #

### 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

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09 FEB 19 AM 11:13  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 11, 2009

REGINALD E GRAFF  
650 SE 30 AVE  
OCALA, FL 34471

SUBJECT: CUSTOM WOOD FURNITURE LLC  
Ref. Number: L07000042640

We have received your document for CUSTOM WOOD FURNITURE LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A description of the occurrence that resulted in the limited liability company's dissolution pursuant to section 608.441, Florida Statutes, must be contained in the document.

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) 245-6984.

Deborah Bruce  
Regulatory Specialist II

Letter Number: 109A00004920

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09 FEB 19 AM 11:13  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLES OF DISSOLUTION  
FOR  
A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is

CUSTOM Wood FURNITURE

2. The Articles of Organization were filed on 4/20/07 and assigned document number

LO7000042640

3. The date the dissolution was approved: ~~2-1-08~~ 2-4-09 REG

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).

I AM 80 years old and HAVE NOT WORKED in  
the past 16 months. REG, 2-18-09

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

Reginald Graff

Printed Name

Reginald GRAFF

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09 FEB 19 AM 11:18  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILING FEE: \$25.00