## L07000052540

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status	<del></del>			
Special Instructions to Filing Officer:				

Office Use Only



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10/29/07--01024--020 \*\*25.00

SECRETARY OF STATE IS DIVISION OF CORPORATIONS

JB

## **COVER LETTER**

P.O. Box 6327

Tallahassee, FL 32314

	ration Section on of Corporations		
SUBJECT:	First Risk Services LLC		
_	(Name of L	imited Liability Company)	
•			
The enclosed A	rticles of Dissolution and fee(s) are su	bmitted for filing.	
Please return all	l correspondence concerning this matte	er to the following:	
	Larry R. Roark		
		(Name of Person)	
	First Risk Services	LLC	D DIVE
		(Firm/Company)	7 OF 1810
	8628 Tidal Bay Lr	1	DI VISION OF 29 PH 2: 40
		(Address)	P
	Tampa, FL 3363	5-6284	7 P. P.
	(Cit	y/State and Zip Code)	40
For further info	rmation concerning this matter, please	call:	
Lar	rry R. Roark	at ( 813 ) 333-	3850
	(Name of Person)	(Area Code & Daytime	: Telephone Number)
Enclosed is a chec	ck for the following amount:		
\$25.00 Filing F	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:		RIER ADDRESS:
	Registration Section Division of Corporations	Registration Sec Division of Cor	
	21.12.011 01 Corporations	217131011 01 001	<del></del>

Division of Corporations
Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

	ن است
1. The name of a limited liability company is	07 00
First Risk Services LLC	7 2
2 4 2 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	9
2. The Articles of Organization were filed on 5-16-07	and assigned document number
L07000052540	
3. The date the dissolution was approved:	07
<ol> <li>A description of occurrence that resulted in the limited lie 608.441, Florida Statutes, (copy 608.441 on back cover l</li> </ol>	letter).
Loss of Major clients and insurance e	environment in FL
5. CHECK ONE:	
All debts, obligations and liabilities of the limite	ed liability company have been paid or discharged.
-OR-	
Adequate provision has been made for the debts.	s, obligations and liabilities pursuant to s. 608.4421.
<ol> <li>All remaining property and assets have been distributed a rights and interests.</li> </ol>	among its members in accordance with their respective
7. CHECK ONE:	
( <del>******</del> 1	
	in any court.
	faction of any judgment, order or decree which may be
	A distribution
natures of the members having the same percentage of mem	abership interests necessary to approve the dissolution:
Signature )	Printed Name
V Signature	/ 1 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3
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11114 1(. 1 1 5 5	/ ////// / /C . / ( O // / ) / /
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- I wy / (. / I w w	- 1771X / /C. / (ON/C)
Tany / (. / Ton	[////////./(ON/C)
Tany / (. / Inn	- [///// / C. / (ON/C)

**FILING FEE: \$25.00**