

607000088436

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

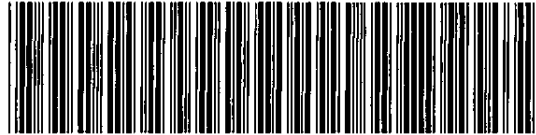
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700117472957

02/08/08--01012--009 **25.00

FILED
2008 FEB -8 AM 10:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. CLINE

FEB 11 2008

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Branches at Home 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:

Roxanne R. Andrews
(Name of Person)

(Firm/Company)

110 Travel Lane
(Address)

Lake Alfred, Fl 33850
(City/State and Zip Code)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2008 FEB - 8 AM 10:17

FILED

For further information concerning this matter, please call:

Roxanne Andrews at (863) 661-0712
(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) |
|--|--|--|--|

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

Branches at Home LLC

2. The Articles of Organization were filed on 08/29/2007 and assigned document number LO7000088436.

3. The date the dissolution was approved: 12/30/2007.

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).

The Company never organized or had an
operating Agreement. No Business was
ever conducted in this LLC.
The Company never got started

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.

FILED
2008 FEB -6 AM 10:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Signature

Roxanne Andrews

Printed Name

Roxanne Andrews