

LD7000109336

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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**JAN 26 2009**

**EXAMINER**

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09 JAN 23 AM 8:54  
TALLAHASSEE FLORIDA  
STATE

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** ANS Smith, 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:

Stephanie D Smith  
(Name of Person)

ANS Smith, LLC  
(Firm/Company)

7689 Manor Drive  
(Address)

Lakeland, FL 33810  
(City/State and Zip Code)

For further information concerning this matter, please call:

Stephanie Smith at ( 863 ) 868-9639  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> 30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

FILED

09 JAN 23 AM 8:54

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

1. The name of a limited liability company is

ANS Smith, LLC

2. The Articles of Organization were filed on October 29, 2007 and assigned document number

L07000109336

3. The date the dissolution was approved: 10/26/2007

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).

Change of career.

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

Stephanie Smith

Printed Name

Stephanie Smith