

LO7000110892

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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MAIL

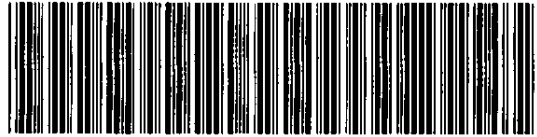
(Business Entity Name)

(Document Number)

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2009 MAR 17 PM 3:08  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

C. LEWIS

MAR - 4 2009

EXAMINER

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: SELECT MANUFACTURING SERVICES, 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:

SHAWN R BEST

(Name of Person)

SELECT MANUFACTURING SERVICES, LLC

(Firm/Company)

20115 BAY CEDAR AVENUE

(Address)

TAMPA, FL 33647

(City/State and Zip Code)

For further information concerning this matter, please call:

SHAWN R BEST

(Name of Person)

at ( 813 ) 241-5527

(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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 4, 2009

SHAWN R. BEST  
SELECT MANUFACTURING SERVICES, LLC  
20115 BAY CEDAR AVE.  
TAMPA, FL 33647

SUBJECT: SELECT MANUFACTURING SERVICES, LLC  
Ref. Number: L07000110892

We have received your document for SELECT MANUFACTURING SERVICES, LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return the corrected original and one copy of 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) 245-6047.

Carolyn Lewis  
Regulatory Specialist II  
Registration/Qualification Section

Letter Number: 909A00007457

ARTICLES OF DISSOLUTION  
FOR  
A LIMITED LIABILITY COMPANY

FILED

2009 MAR 17 PM 3: 08

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is  
**SELECT MANUFACTURING SERVICES, LLC**

2. The Articles of Organization were filed on 11/01/2007 and assigned document number  
L07000110892

3. The date the dissolution was approved: 12/31/2008

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).

Upon the written consent of all of the members of the limited liability company,  
this limited liability company hereby dissolves.

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

Printed Name

Shawn R. Best 3/16/2009

SHAWN R. BEST