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(Requestor's Name)					
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PICK-UP WAIT MAIL					
(Business Entity Name)					
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B. KOHR

SEP 1 4 2009

EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporations			
SUBJE	CCT: Con-Tek Carriers, LLC			
00002		imited Liability Company)		
				90 758
The en	closed Articles of Dissolution and fee(s) are sub	omitted for filing.		SEPI
Please	return all correspondence concerning this matte	er to the following:		9
	Chad Converse Manag	ing Member		09 SEP 10 AH 10: 30
		(Name of Person)		
	Con-Tek Carriers, LLC			
(Firm/Company)				
6175 NW 60th Street				
Silver Springs, Florida 34488				
		y/State and Zip Code)		
For fur	ther information concerning this matter, please	call:		
	Chad Converse	at (352)	266 8276	
	(Name of Person)		& Daytime Telephone Number	r)
Enclose	ed is a check for the following amount:			
\$25.0	00 Filing Fee & Certificate of Status	\$55.00 Filing Fce & Certified Copy (additional copy is en	Certificate of Structored Certificate of Structored Certified Copy (additional copy)	atus &
	MAILING ADDRESS:		T/COURIER ADDRI	ESS:
	Registration Section Division of Corporations	Registration Section Division of Corporations		
	P.O. Box 6327	Clifton I	Building	
	Tallahassee, FL 32314	2661 Ex	ecutive Center Circle	

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

and assigned document number
9
iability company's dissolution pursuant to section letter).
ed liability company have been paid or discharged.
s, obligations and liabilities pursuant to s. 608.4421. among its members in accordance with their respective
uniong no monato in use scanned in the scanned
in any court.
faction of any judgment, order or decree which may b
mbership interests necessary to approve the dissolution
Printed Name
Chad M Converse
· · · · ·

FILING FEE: \$25.00