107000120058

(Daniel Name)	
(Requestor's Name)	
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(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	u. •
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EXAMINER

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SECRETARY OF STATE TALLAHASSEE FLORIDA

COVER LETTER

TO:		ation Section on of Corporations				
SUBJE	_{CT:} F	lorida Benefits Publ	ishers, L.L.C) .		_
		(Nam	e of Limited Liabili	ty Company)	
The end	closed A	ticles of Dissolution and fee(s)	are submitted for fil	ing.		
Please 1	eturn all	correspondence concerning this	matter to the follow	ving:		
		Martin J. Burke, III				
			(Name of Perso	on)		
		Florida Benefits Pu	blishers, L.L	.C.		
			(Firm/Company	y)		
		410 42nd Ave NE				
			(Address)			
		St. Petersburg, Flo	rida 3373		លម្ខាធ់ ភូមិសាស្ត្រីកូច	
			(City/State and Zip	Code)		Service Servic
				27 (,
For furt	her infor	mation concerning this matter, p	olease call:	727	366	2774 1685
	Mart	in J. Burke, III	at (480	, 32h-	1685
		(Name of Person)		(Area Code	& Daytime	Telephone Number)
Enclosed	l is a chec	k for the following amount:				
\$25.00) Filing F	ee 30.00 Filing Fee & Certificate of Sta	tus Certif	Filing Fee & led Copy lonal 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			ation Secon of Cor	ction porations
		P.O. Box 6327	To the same of the	Clifton	Building	[
		Tallahassee, FL 32314	AM E VINCE	2661 E	xecutive issee, FL	Center Circle



FLORIDA DEPARTMENT OF STATE Division of Corporations

February 24, 2009

MARTIN J. BURKE III 410 42ND AVENUE NE ST. PETERSBURG, FL 33703

SUBJECT: FLORIDA BENEFITS PUBLISHERS, L.L.C.

Ref. Number: L07000120058

We have received your document for FLORIDA BENEFITS PUBLISHERS, L.L.C. and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Number three of the document must contain the date the decision to dissolve was approved or became effective. This date must be prior to the date this document was submitted for filing.

Please return 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) 245-6967.

Letter Number: 309A00006490

Leslie Sellers Regulatory Specialist II

Division of Corporations - P.O. BOX 6327 Tallahassaa Florida 32314

· ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

FILED 09 MAR 10 AM 8: 25

1. The name of a limited liability company is Florida Benefits Publishers, L.L.C.	SEUMERARY OF STATE TALLAHASSEE FLORIDA
2. The Articles of Organization were filed on 11/30 L07000120058	0/2007 and assigned document number
3. The date the dissolution was approved:	1/2007
	ited liability company's dissolution pursuant to section over letter). vided written consent to the dissolution
5. CHECK ONE:	
All debts, obligations and liabilities of the	limited liability company have been paid or discharged.
	debts, obligations and liabilities pursuant to s. 608.4421.
All remaining property and assets have been distrib rights and interests.	outed among its members in accordance with their respective
7. CHECK ONE:	
✓ There are no suits pending against the com	pany in any court.
-OR- Adequate provision has been made for the entered against it in any pending suit.	satisfaction of any judgment, order or decree which may be
Signatures of the members having the same percentage o	f membership interests necessary to approve the dissolution:
Signature	Printed Name
MIN	Martin J. Burke, III