

JUL-23-2015 THU 02:48 PM

FAX NO.

P. 01

Division of Corporations

Page 1 of 1

LO700024196

Florida Department of State
Division of Corporations
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(((H15000179286 3)))



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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : SMITH HULSEY & BUSEY
Account Number : 075030000653
Phone : (904) 359-7700
Fax Number : (904) 359-7708

**LLC DISSOLUTION OR WITHDRAWAL
LINEAR SOLUTIONS, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

RECEIVED

15 JUL 23 PM 3:14

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15 JUL 23 AM 9:04

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JUL 24 2015

S. YOUNG

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**ARTICLES OF DISSOLUTION
OF
LINEAR SOLUTIONS, LLC**

ARTICLE I

The name of this limited liability company is Linear Solutions, LLC (the "Company").

ARTICLE II

The Articles of Organization of the Company were filed on December 14, 2007, and were assigned document number L07000124196.

ARTICLE III

The dissolution of the Company was authorized by written consent adopted by the sole Member of the Company on July 15, 2015.

ARTICLE IV

The dissolution of the Company shall be effective as of the date of filing of these Articles of Dissolution.

Dated this 15 day of July, 2015.


JEFFREY S. BOGAN
Sole Member

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15 JUL 23 AM 9:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Notice of Limited Liability Company Dissolution

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 60S.0712, F.S.

This "*Notice of Limited Liability Company Dissolution*" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company: Linear Solutions, LLC

Document number of Limited Liability Company is: L07000124196

Date of dissolution was: 07-23-2015

Description of information that must be included in a written claim:

The identity and contact information for the person or entity asserting the claim, a description of the basis for the claim,
the date the claim arose, the amount of the claim, and a description of the facts and circumstances underlying the claim.

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

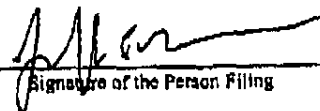
P.O. Box 1788
Fairview, North Carolina 28730

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15 JUL 23 AM 9:04
SECRETARY OF STATE
TALLAHASSEE, FL 32304

A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Jeffrey S. Bogan

Printed Name of the Person Filing


Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00

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