L080000038677

(Re	questor's Name)	
(Ad	dress)	
. (Ad	dress)	<u> </u>
, (Cit	y/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
. (Bu	siness Entity Name	e)
(Do	cument Number)	
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06/21/10--01015--021 **25.00

T. CLINE

JUN 2 2 2010

EXAMINE

ECRETARY OF STATE

	ation Section n of Corporations	1	•	•		
SUBJECT:	BIRTHDAY PI	ARTY ted Liability Com	n A	BOX,	LLC	
	(/ taile of Eliti		'.			
					•	
The enclosed Ar	rticles of Dissolution and fee(s) are submi	itted for filing.	, ,			
Please return all	correspondence concerning this matter to	the following:			•	
7	JEANINE	WATE	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~			
THE THE THE THE	- (Na	me of Person)			- a'	•
	BIRTHDAY (Fin					
	1244 SCAN	DIA TER	RACE	•		
•		(Address)				
-	OVIET (City/St	O, FL	32765	ا		
٠	. (City/St	ate and Zip Code)	•	•		
<u>J.</u>	The concerning this matter, please call the concerning the concern	at (/ O (Area	Code & Daytime	\$60.00 Filing Certificate of	CRETARY OF STATE	

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

1. The name of a limited liability con	npany is	٠,	•		
BIRTHDAY	PART	y. 12	A S	ox, LLC	
2. The Articles of Organization were fi				•	
108000028677			W Tun No		
3. The date the dissolution was approve	/	110			
4. A description of occurrence that rest 608.441, Florida Statutes, (copy 608	ulted in the limi 3.441 on back co	ted liability cover letter).	ompany's dis	solution pursua	nt to section
NOT PROFIL	FABLE		,		
	•			. ;	, ;
5. CHECK ONE:					
Adequate provision has bee 6. All remaining property and assets harights and interests.				1 1	75-1
7. CHECK ONE:	• • • • • • • • • • • • • • • • • • • •		-		TO E
Phere are no suits pending a OR- Adequate provision has bee entered against it in any pen	n made for the		٠.	nt, order or decr	or which may be
gnatures of the members having the sam		Fmamharahin	Intonetomo		a the dissolution.
guatures of the memoers having the same	ie percentage of	membership	interests nec	essary to approv	e the dissolution.
Signature	•			Printed Name	•
Clean lest	<u>.</u>		Je	ANINE	WATKIN
	1	•		4	
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FILING FEE: \$25.00