

LO8 006083880

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

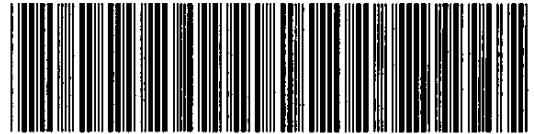
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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12/22/08--01049--010 **105.00

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08 DEC 31 AM 10:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. CLINE
DEC 31 2008
EXAMINER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 23, 2008

ALEX TELLY
3363 NE 163 STREET SUITE 507
NORTH MIAMI BEACH, FL 33160

SUBJECT: EXECUTIVE STAFFING SERVICES, LLC
Ref. Number: L08000083880

We have received your document for EXECUTIVE STAFFING SERVICES, LLC and your check(s) totaling \$35.00. 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 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) 245-6020.

Tammi Cline
Regulatory Specialist II

Letter Number: 608A00061472

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: EXECUTIVE STAFFING 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:

ALEX TELLY

(Name of Person)

(Firm/Company)

3363 NE 163 ST. SUITE 507

(Address)

NORTH MIAMI BEACH, FL 33160

(City/State and Zip Code)

For further information concerning this matter, please call:

DANNY

(Name of Person)

at (305) 525-0825

(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

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TALLAHASSEE, FLORIDA

**ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is

EXECUTIVE STAFFING SERVICES, LLC

2. The Articles of Organization were filed on **09/03/2008**

and assigned document number

L08000083880

3. The date the dissolution was approved: **12/26/2008**

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).

NO LONGER IN BUSINESS.

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TALLAHASSEE, FLORIDA

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:

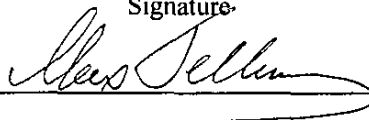
☒ There are no suits pending against the company in any court.

-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

ALEX TELLY