108000093695

(Requestor's Name)				
(Address)				
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TALLAHASSE FLORID

B. BOSTICK

APR 2 9 2011

EXAMINER

COVER LETTER

	gistration Section vision of Corporations				
SUBJECT:	Schneider Agency LLC				
	(Name of	Limited Liability Company)			
The enclosed	d Articles of Dissolution and fee(s) are s	submitted for filing.			
Please return	n all correspondence concerning this ma	tter to the following:			
		(Name of Person)			
	NG Squared One LLC				
	NG Squared One LLC	(Firm/Company)		TALL II	
	7941 Ravenna Road			APR 2	
		(Address)		ST. CO	(Constant
	Hudson OH 44236			PM 4:2	
	(C	ity/State and Zip Code)		PRIDE +: 2	
For further in	nformation concerning this matter, pleas	e call:	;	D	
Sarah Schofield at (330) 650-6360 x12		5			
	(Name of Person)		aytime Telephone Num	ber)	
Enclosed is a	check for the following amount:				
\$25.00 Filin	ng Fee 30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclo		Status &	
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Registratio Division of Clifton Bui	Corporations Iding utive Center Circle		

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is Schneider Agency LLC		
2. The Articles of Organization were filed on CL08000093695	october 2, 2008	and assigned document numbe
3. The date the dissolution was approved: 2/16	5/2011	
4. A description of occurrence that resulted in th 608.441, Florida Statutes, (copy 608.441 on b Unanimous written agreement of the	e limited liability company's ack cover letter).	
5. ČHECK ONE:		
All debts, obligations and liabilities o -OR- Adequate provision has been made fo 6. All remaining property and assets have been d	or the debts, obligations and I	iabilities pursuant to s. 608.4421.
rights and interests. 7. CHECK ONE: There are no suits pending against the OR- Adequate provision has been made fo entered against it in any pending suit.		ment, order or decree which may be
ignatures of the members having the same percentage		PH I
Signature		Printed Name
John Il	John B	. Nye
<i>(</i>		
		

FILING FEE: \$25.00