

LOS000102272

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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STATE OF FLORIDA
TALLAHASSEE
14 JAN -3 AM 11:19
01/03/14

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: WARM SOCKS ENTERPRISES
(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:

GLENN ELLISON
(Name of Person)

WARM SOCKS ENTERPRISES
(Firm/Company)

9231 NW 61st ST
(Address)

TAMARAC/FLORIDA/33321
(City/State and Zip Code)

For further information concerning this matter, please call:

GLENN ELLISON at (954) 816-6632
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

\$25.00 Filing Fee and Certificate of Dissolution

\$55.00 Filing Fee, Certificate of Dissolution &
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

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

1. The name of a limited liability company is

WARM SOCKS ENTERISES

2. The Articles of Organization were filed on 10/31/2008 and assigned
document number L08000102272

3. The delayed effective date the dissolution if not effective on the date of filing: N/A

4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).

I formed the company as a requirement to work from home for
a company called Arise. However, after two months, I de-
termined that I no longer wished to work for Arise. Since
then, I have had no need for an LLC.

5. If there are no members, enter the name and address of the person appointed to wind up the company's
activities and affairs:

Glenn Ellison

9231 NW 61st St

Tamarac FL 33321

6. Signature of an authorized person or if there are no members, the signature of the person appointed and listed
above to wind up the company's activities and affairs:

Signature

Printed Name



Glenn Ellison

FILING FEE: \$25.00

SECRET
TALLAHASSEE, FLORIDA

14 JAN -3 PM 11:19

FILED