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| (Requestor's Name) | | | |
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| (City/State/Zip/Phone #) | | | |
| PICK-UP WAIT MAIL | | | |
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| (Rusiness Entity Name) | | | |
| (Business Entity Name) | | | |
| (December A Niverbook | | | |
| (Document Number) | | | |
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| Certified Copies Certificates of Status | | | |
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| Special instructions to Filing Officer: | | | |
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Office Use Only



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> UEFAR PLAN OF STATE IVISION OF CURPORATION TALLAHASSEF, FLORIDA

RECEIVED

MAY -3 PM 12: 38

T. CLINE

MAY - 3 2010

EXAMINER

TO MAY -3 PM 12: 49

COVER LETTER

| | ration Section on of Corporations | | | |
|--|--|--|--|--|
| SUBJECT: Meeting All Expectations, LLC | | | | |
| (Name of Limited Liability Company) | | | | |
| | | | | |
| The enclosed A | rticles of Dissolution and fee(s) are s | ubmitted for filing. | | |
| Please return al | correspondence concerning this mat | ter to the following: | | |
| | Rita A. Cheatham | | | |
| (Name of Person) | | | | |
| Meeting All Expectations, LLC | | | | |
| (Firm/Company) | | | | |
| 2424 Rosemary Terrace | | | | |
| (Address) | | | | |
| | Tallahassee, FL 3230 | 3 | | |
| (City/State and Zip Code) | | | | |
| For further info | rmation concerning this matter, pleas | e call: | | |
| Rita | A. Cheatham | at (850) 284-9849 | | |
| - | (Name of Person) | (Area Code & Daytime Telephone Number) | | |
| Enclosed is a che | ck for the following amount: | · · · · · · | | |
| √]\$25.00 Filing l | Fee 30.00 Filing Fee & Certificate of Status | S55.00 Filing Fee & S60.00 Filing Fee Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) 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

| The name of a limited liability company is Meeting All Expectations, LLC | |
|--|--|
| 2. The Articles of Organization were filed on | and assigned document number |
| 3. The date the dissolution was approved: 10/25/ | 09 |
| 608.441, Florida Statutes, (copy 608.441 on back | mited liability company's dissolution pursuant to section cover letter). I got involved in another business that I was more |
| interested in. So, I began the new business in Nove | ember 2009 and I am now devoting more time to that business |
| 5. CHECK ONE: | |
| OR-Adequate provision has been made for the | e limited liability company have been paid or discharged, the debts, obligations and liabilities pursuant to s. 608.4421. The ibuted among its members in accordance with their respective mpany in any court. |
| OR- | e satisfaction of any judgment, order or decree which may be |
| Signatures of the members having the same percentage | of membership interests necessary to approve the discolution: |
| Signature | Printed Name |
| Rota Of Chratham | Rita A. Cheatham 👸 💆 🚺 |
| | |
| | CORIDA |
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