

LC9000071308

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

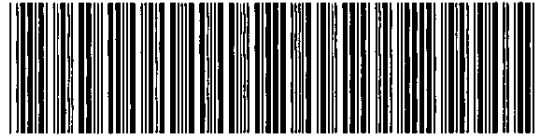
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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12/22/14--01003--008 \*\*25.00

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14 DEC 22 AM 9:49

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TALLAHASSEE FLORIDA  
STATE DEPARTMENT OF STATE

DEC 23 2014  
D. BRUCE

**CT Corporation System**

515 E. Park Ave., Tallahassee, FL, 32301

850-205-8842

**SSI ROBOTICS LLC**

**L09000021308**

**Thank you!**

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Profit                        | <input type="checkbox"/> Amendment                                | <input type="checkbox"/> Merger             |
| <input type="checkbox"/> Nonprofit                     |   |   |
| <input type="checkbox"/> Foreign                       | <input checked="" type="checkbox"/> <b>Dissolution/Withdrawal</b> | <input type="checkbox"/> Mark               |
|  | <input type="checkbox"/> Reinstatement                            |   |
| <input type="checkbox"/> Limited Partnership           | <input type="checkbox"/> Annual Report                            | <input type="checkbox"/> Other              |
| <input checked="" type="checkbox"/> <b>LLC</b>         | <input type="checkbox"/> Name Registration                        |   |
| <input checked="" type="checkbox"/> <b>Dissolution</b> | <input type="checkbox"/> Fictitious Name                          | <input type="checkbox"/> UCC                |
| <input type="checkbox"/> Certified Copy                | <input type="checkbox"/> Photocopies                              | <input type="checkbox"/> CUS                |
| <input type="checkbox"/> Call When Ready               | <input type="checkbox"/> Call If Problem                          |   |
| <input checked="" type="checkbox"/> Walk In            | <input type="checkbox"/> Will Wait                                | <input checked="" type="checkbox"/> Pick Up |
| <input type="checkbox"/> Mail Out                      |   |   |

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TALLAHASSEE, FLORIDA

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Name \_\_\_\_\_  
 Availability \_\_\_\_\_  
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 Updater \_\_\_\_\_  
 Verifier \_\_\_\_\_  
 W.P. Verifier \_\_\_\_\_

12/22/2014  
  
**ST**

Order#: **9385246**  
 Ref#: \_\_\_\_\_  
 Amount: \$ \_\_\_\_\_

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** SSI ROBOTICS 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:

PAULO MIRANDA  
(Name of Person)

PSM CORPORATE SERCICE  
(Firm/Company)

1001 BRICKELL BAY DRIVE, SUITE 2406  
(Address)

MIAMI, FL 33131  
(City/State and Zip Code)

For further information concerning this matter, please call:

PAULO MIRANDA at ( 305 ) 305-456-3752  
(Name of Person) (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

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

1. The name of a limited liability company is

SSI ROBOTICS

2. The Articles of Organization were filed on 03/04/2009 and assigned document number L09000021308.

3. The date the dissolution was approved: 11/18/2014.

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).

The entity no longer wants to keep the company open.

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. 608.442.

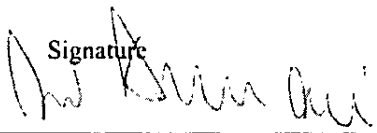
6. All remaining property and assets have been distributed among its members in accordance with their respective rights and interests.

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.

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Signatures of the members having the same percentage of membership interests necessary to approve the dissolution:

Signature 

Printed Name

HERMAN, BARRY W