

LO9000028219

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

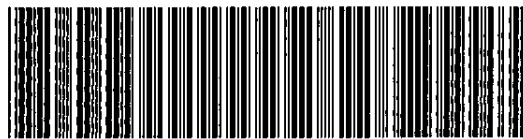
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300199811303

04/04/11--01020--005 **25.00

FILED
2011 APR -4 PM 12:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. CLINE

APR - 5 2011

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MDSR Business Solutions, 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:

Michael Robinson

(Name of Person)

MDSR Business Solutions, LLC

(Firm/Company)

3848 Monfero Avenue

(Address)

North Port, FL 34286

(City/State and Zip Code)

For further information concerning this matter, please call:

Susan Robinson

(Name of Person)

at (941) 944 423 2909

(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

2011 APR -4 PM 12:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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

1. The name of a limited liability company is

MDSR Business Solutions, LLC

2. The Articles of Organization were filed on 3/23/2009 and assigned document number

FL0900028219

3. The date the dissolution was approved: 3/1/2011

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).

Due to a very poor economy the one
client I had no longer needed our services.
Businesses in Florida are suffering and I can no
longer stay in Business.

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 ss. 608.421.

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

Michael Robinson

Susan Robinson

Michael Robinson

Susan Robinson

FILING FEE: \$25.00