

L09000008592

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : BRENNAN, MANNA AND DIAMOND, P.L.
Account Number : I20050000098
Phone : (239)992-6578
Fax Number : (239)390-1920

LLC DISSOLUTION OR WITHDRAWAL

GO BEYOND NETWORK, LLC

Certificate of Status	0
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TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA

COVER LETTER

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TO: Registration Section
Division of Corporations

SUBJECT: GO BEYOND NETWORK, 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:

DONNA M. FLAMMANG

(Name of Person)

BRENNAN, MANNA & DIAMOND, P.L.

(Firm/Company)

8891 BRIGHTON LANE, SUITE 112

(Address)

BONITA SPRINGS, FLORIDA 34135

(City/State and Zip Code)

For further information concerning this matter, please call:

DONNA M. FLAMMANG

(Name of Person)

239

992-6578

at (

(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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is
GO BEYOND NETWORK, LLC

2. The Articles of Organization were filed on MARCH 24, 2009 and assigned
document number L09000028592

3. The delayed effective date the dissolution if not effective on the date of filing:
(effective date cannot be prior to or more than 90 days later than date document is received for filing)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be
listed as the document's effective date on the Department of State's records.

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).
CONSENT OF ALL MEMBERS

5. If there are no members, enter the name and address of the person appointed to wind up the company's
activities and affairs: NOT APPLICABLE

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:

Bethann Kassman
Signature

BETHANN KASSMAN

Printed Name

FILING FEE: \$25.00

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