

L090000036855

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

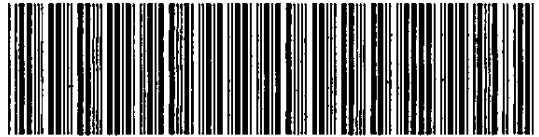
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000161216000

10/06/09--01029--015 **43.75

FILED
09 OCT 19 PM 4:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

W
OCT - 7 2009

J. BRYAN

OCT 20 2009

EXAMINER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 7, 2009

MATTHEW J. FULLER
FULLER DESIGN LAB LLC
1801 FERGUSON CT SOUTH, APT. B
FORT WORTH, TX 76115

SUBJECT: FULLER DESIGN LAB LLC
Ref. Number: L09000036855

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

09 OCT 19 PM 4:28

FILED

We have received your document for FULLER DESIGN LAB LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You completed the wrong form

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan
Regulatory Specialist II

Letter Number: 009A00032362

New document attached.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Fuller Design Lab 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:

Matthew J. Fuller

(Name of Person)

Fuller Design Lab LLC

(Firm/Company)

1801-B Ferguson CT South

(Address)

Fort Worth, TX 76115

(City/State and Zip Code)

FILED
09 OCT 19 PM 4:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Matthew J. Fuller

(Name of Person)

at (817) 360-2278

(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

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

FILED
09 OCT 19 PM 4:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is

Fuller Design Lab LLC

2. The Articles of Organization were filed on 04/16/2009 and assigned document number
L09000036855

3. The date the dissolution was approved: 09/26/09

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).

Consent of all of the members of the limited liability company (single member LLC)

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. 608.4421.

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

Matthew J. Fuller

Printed Name

Matthew J. Fuller

FILING FEE: \$25.00