L09000041465

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| (Requestor's Name) | | | | | |
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| (City/State/Zip/Phone #) | | | | | |
| PICK-UP | WAIT | MAIL | | | |
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| (Bus | siness Entity Nai | me) | | | |
| (D- | | | | | |
| (Doc | cument Number) | | | | |
| Certified Copies | Certificate | s of Status | | | |
| | | | | | |
| Special Instructions to F | Filing Officer: | | | | |
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2012 FEB -6 PM 1:51
SECRETARY OF STATE

J. BRYAN

FEB - 7 2012

EXAMINER

COVER LETTER

TO:

| | ration Section on of Corporations | | |
|-------------------|--|--|--|
| SUBJECT: C | Consolidated Testing Se | | |
| | (Name of i | Limited Liability Company) | |
| | rticles of Dissolution and fee(s) are sulf correspondence concerning this matt | Ţ. | • |
| | William F. Peters | | |
| | | (Name of Person) | _ |
| | Consolidated Testing S | Services,LLC | |
| | 1 | (Firm/Company) | - 1 23 |
| | 750 Oak Heights Ct. S | uite 306 | 7012 FEB -6 SECRETARY TALLAHASSI |
| | | (Address) | 一部一 |
| | Port Orange Florida 32 | 2127 | FEB -6 PR CARTARY OF CAHASSEE. F |
| | (Cit | y/State and Zip Code) | |
| For further info | rmation concerning this matter, please | call: | PH 1:51 SEE. FLORIDA |
| Willi | am Peters | at (386) 589-4264 | |
| | (Name of Person) | (Area Code & Daytime Telephone Nu | mber) |
| Enclosed is a che | ck for the following amount: | | |
| \$25.00 Filing F | ee | \$55.00 Filing Fee & S60.00 F Certified Copy Certificate of Certified Copy (additional copy is enclosed) | of Status & |
| | MAILING ADDRESS: Registration Section Division of Corporations | STREET/COURIER ADD Registration Section Division of Corporations | PRESS: |
| | P.O. Box 6327 | Clifton Building | |

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

| The name of a limited liability company is Consolidated Testing Services, LLC | | SEE. F | 3 0 |
|--|---|------------------|------------------|
| 2. The Articles of Organization were filed on April 2 L09000041465 | 9,2012 | and assigned | Soument numbe |
| 3. The date the dissolution was approved: 1/26/201 | 2 | | |
| 4. A description of occurrence that resulted in the limite 608.441, Florida Statutes, (copy 608.441 on back cox Slow Economy, Lack of work in cons | d liability company's dissover letter). | | t to section |
| 5. CHECK ONE: ✓ All debts, obligations and liabilities of the lin | nited liability company hav | ve been paid or | discharged. |
| OR- Adequate provision has been made for the de | | • | |
| All remaining property and assets have been distribut rights and interests. | ed among its members in a | ccordance with | their respective |
| 7. CHECK ONE: | | | |
| ✓ There are no suits pending against the compa -OR- Adequate provision has been made for the sa entered against it in any pending suit. | - | , order or decre | e which may be |
| ignatures of the members having the same percentage of r | nembership interests neces | sary to approve | the dissolution |
| Signature | F | rinted Name | |
| Well B Fin | Willia | m F. 1 | ETERS |
| Caroline E. Peters | Caroli | re E. / | Oters |
| | | | |
| | | | |
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