L09000053139

•				
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
<u>L 09-53/39</u> (Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
2-8 AM 8: 00 A SEE, FLORIDA				
Office Use Only				



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12/07/09--01057--004 **35.00

FILED
10 JAN 27 PM 3: 17
SECRETARY OF STATE
SECRETARY OF STATE

COVER LETTER

Registration Section

TO:

Division of C	Corporations		
SUBJECT: Rea	alfx LLC		
50 5 0201	(Name of L	imited Liability Company)	
The enclosed Articles	of Dissolution and fee(s) are su	bmitted for filing.	
Please return all corres	spondence concerning this matte	er to the following:	
	Jason	(Name of Person)	
	^	W FX LLC (Firm/Company)	
	3617 W	st Cass Street (Address)	
	Tampa	FL 33 609 y/State and Zip Code)	
For further information	n concerning this matter, please	call:	
Jason	(Name of Person)	at (<u>813</u>) <u>507</u> (Area Code & Daytime	- 2221 Telephone Number)
Enclosed is a check for the	he 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		STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building	
Tallahassee, FL 32314		2661 Executive Center Circle	

Tallahassee, FL 32301



December 9, 2009

JASON REYNOLDS 3617 WEST CASS STREET TAMPA, FL 33609

SUBJECT: REGALFX LLC Ref. Number: L09000053139

We have received your document for REGALFX LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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) 245-6067.

Letter Number: 909A00037553

Neysa Culligan Regulatory Specialist II

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

FILED

10 JAN 27 PM 3: 17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is	TALLAHASSEE, FLORI
2. The Articles of Organization were filed on	and assigned document number
 3. The date the dissolution was approved: 11/2 4. A description of occurrence that resulted in the lim 608.441, Florida Statutes, (copy 608.441 on back of the control o	ited liability company's dissolution pursuant to section
All shareholders agree to dis	some company due to not
-OR-Adequate provision has been made for the 6. All remaining property and assets have been distril rights and interests. 7. CHECK ONE: There are no suits pending against the con-OR-Adequate provision has been made for the	limited liability company have been paid or discharged. debts, obligations and liabilities pursuant to s. 608.4421. puted among its members in accordance with their respective apany in any court. 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	of membership interests necessary to approve the dissolution:
Signature	Printed Name JASON Reynolds
They John	Stacy Johnson