L09000065715

| (Requestor's Name) | | | |
|---|--|--|--|
| | | | |
| (Address) | | | |
| | | | |
| (Address) | | | |
| | | | |
| (City/State/Zip/Phone #) | | | |
| PICK-UP WAIT MAIL | | | |
| | | | |
| (Business Entity Name) | | | |
| | | | |
| (Document Number) | | | |
| · | | | |
| Certified Copies Certificates of Status | | | |
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| Special Instructions to Filing Officer: | | | |
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Office Use Only



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05/05/10--01029--015 **25.00



C. LEWIS MAY 1 0 2010 EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations

| SUBJECT: | NORRITON ENTERPRISES LLC | | | | |
|--|---|--|--|-------------------|---|
| | (Name of Limited Liability Company) | | | | |
| The enclosed Ar | rticles of Dissolution and fee(s) are submitted for filing. | | | | |
| Piease return all | correspondence concerning this matter to the following: | | | | |
| | JEANNETTE NOLAN | | | | |
| (Name of Person) NORRITON ENTERPRISES LLC (Firm Company) 181 WESTMORELAND CIRCLE (Address) | | | | | |
| | | | | | KISSIMMEE FLORIDA 34744 |
| | | | | | (City State and Zip Code) |
| | | | | For further infor | mation concerning this matter, please call: |
| | | | | JEAI | NNETTE NOLAN at (321) 284-4339 |
| | (Name of Person) (Area Code & Daytime Telephone Number) | | | | |
| Enclosed is a chec | k for the following amount: | | | | |
| \$25.00 Filing Fo | ce 30.00 Filing Fee & \$55.00 Filing Fee & \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) 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

FILED

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

2010 MAY -5 AM 19: 58

SECRETARY OF STATE FALLAHASSEE, FLORIDA

| The name of a limited liability company is Norriton Enterprises LLC | TALLAHASSELT COM |
|--|--|
| 2. The Articles of Organization were filed on July 8, 2009 L09000065715 | and assigned document number |
| 3. The date the dissolution was approved: 5-5-10 | · |
| 4. A description of occurrence that resulted in the limited liabil 608.441, Florida Statutes, (copy 608.441 on back cover letter | ity company's dissolution pursuant to section r). |
| Written Consent | |
| | |
| 5. CHECK ONE: | |
| All debts, obligations and liabilities of the limited liabilities of the limited liabilities of the debts, ob | ligations and liabilities pursuant to s. 608.4421. |
| All remaining property and assets have been distributed amo rights and interests. | ng its members in accordance with their respective |
| 7. CHECK ONE: There are no suits pending against the company in a | ny govet |
| OR- Adequate provision has been made for the satisfaction entered against it in any pending suit. | |
| ignatures of the members having the same percentage of member | ship interests necessary to approve the dissolution: |
| Signature | Printed Name |
| ecertle / he | Jeannette Nolan |
| | |
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