

LO9000093145

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

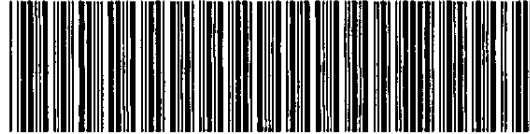
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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200251259622

09/16/13--01010--009 **35.00

FILED
13 OCT -9 PM 12:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. Burch OCT 10 2013

p-k

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SL Powers of CT, 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:

Rebecca Neeriemer
(Name of Person)

Extensible Computing LLC
(Firm/Company)

1254 Okeechobee Rd.
(Address)

West Palm Beach, FL 33401
(City/State and Zip Code)

For further information concerning this matter, please call:

Rebecca Neeriemer at (561) 214-8076
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

p \$25.00 Filing Fee

p \$30.00 Filing Fee &
Certificate of Status

p \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

p \$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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 18, 2013

REBECCA NEERIEMER
1254 OKEECHOBEE RD
WEST PALM BEACH, FL 33401

SUBJECT: SLPOWERS OF CT, LLC
Ref. Number: L09000093145

We have received your document for SLPOWERS OF CT, 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):

You submitted wrong type of 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) 245-6051.

Tim Burch
Regulatory Specialist II

Letter Number: 713A00021983

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

FILED
13 OCT -9 PM 12:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is

SL Powers of CT, LLC

2. The Articles of Organization were filed on 9/28/09 and assigned document number

L09000093145

3. The date the dissolution was approved: 8/27/13

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).

This company never commenced operations and
it was decided it never would. Business plans changed.

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:

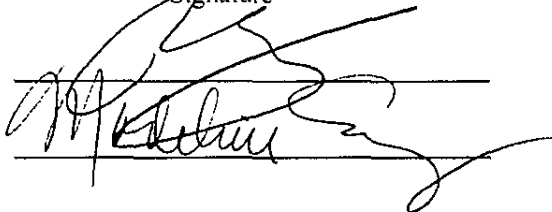
☒ There are no suits pending against the company in any court.

-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



Printed Name

Rory Sanchez

Madeline Sanchez