

L09000095866

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

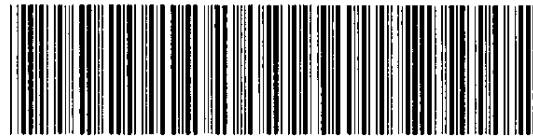
(Business Entity Name)

(Document Number)

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B. KOHR

DEC 10 2009

EXAMINER



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 213417 7664360

AUTHORIZATION :

[Signature]

COST LIMIT : \$ 25.00

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ORDER DATE : 12/10/09

ORDER TIME : 8:55 AM

ORDER NO. : 213417-005

CUSTOMER NO: 7664360

DOMESTIC FILINGS

NAME: IDEAL COLLISION CENTER, LLC

XX ARTICLES OF DISSOLUTION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
XX PLAIN STAMPED COPY
____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Carina L. Dunlap - EXT# 2951

EXAMINER'S INITIALS: _____

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

1. The name of a limited liability company is
IDEAL COLLISION CENTER, LLC

2. The Articles of Organization were filed on 10/05/2009 and assigned document number
L09000095866

3. The date the dissolution was approved: 11/1/09

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).

~ NO ACTIVITY ~
~ Decided to not go forward with company ~

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.

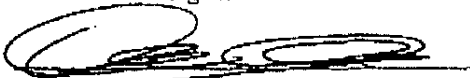
6. All remaining property and assets have been distributed among its members in accordance with their respective rights and interests.

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

Dominic Adddeo

FILING FEE: \$25.00

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