

L09000108370

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

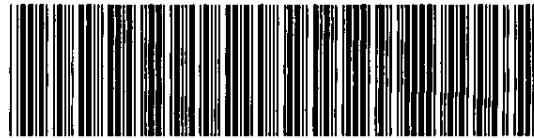
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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12/29/10--01010--022 \*\*43.75

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11 JAN 31 AM 8:47  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

W

J. BRYAN

FEB -1 2011

EXAMINER



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 5, 2011

CAROL S QUAIROLI  
NIQU, LLC  
15758 BENT CREEK RD  
WELLINGTON, FL 33414

SUBJECT: NIKU, LLC  
Ref. Number: L09000108370

LED  
11 JAN 31 AM 8:47  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

We have received your document for NIKU, LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You completed the wrong 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) 245-6043.

Joey Bryan  
Regulatory Specialist II

Letter Number: 611A00000364

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** NIQU 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:

CAROL QUAIROLI

(Name of Person)

NIQU, LLC

(Firm/Company)

15758 BENT CREEK ROAD

(Address)

WELLINGTON, FL. 33414

(City/State and Zip Code)

For further information concerning this matter, please call:

CAROL QUAIROLI

(Name of Person)

at ( 561 ) 791-0066

(Area Code & Daytime Telephone Number)

Enclosed is a check for the 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  
Tallahassee, FL 32314

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

11 JAN 31 AM 8:47

FILED

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

1. The name of a limited liability company is

NIQU, LLC

2. The Articles of Organization were filed on 11/10/09 and assigned document number L09000108370

3. The date the dissolution was approved: 12/01/10

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).

(C)

CORPORATION NEVER COMMENCED BUSINESS

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TALLAHASSEE, FLORIDA

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  
Carol Quairolì  
Nick Quairolì

Printed Name

CAROL QUAIROLI

NICK QUAIROLI

**FILING FEE: \$25.00**