

# L09000115584

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

\_\_\_\_\_  
(Business Entity Name)

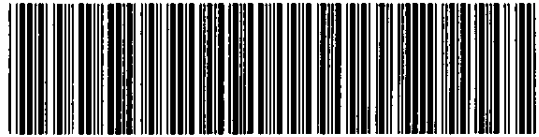
\_\_\_\_\_  
(Document Number)

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2010 APR 19 PM 4:46  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

C. LEWIS  
Apr. 20, 2010  
EXAMINER

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Complete Office Services and Supplies LLC  
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Articles of Revocation of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Reiter, Shoshana  
Name of Person

\_\_\_\_\_  
Firm/Company

1940 NE 194 Dr.  
Address

N. Miami Beach, FL 33179  
City/State and Zip Code

Shoshana43@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

SHOSHANA REITER at (305) 982-7673  
Name of Person Area Code & Daytime Telephone Number

### STREET/COURIER ADDRESS:

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

### MAILING ADDRESS:

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

- ☒ \$100 Filing Fee    ☐ \$105 Filing Fee & Certificate of Status    ☐ \$130 Filing Fee & Certified Copy    ☐ \$135 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 25, 2010

SHOSHANA REITER  
COMPLETE OFFICE SERVICES AND SUPPLIES  
1940 NE 194 DR.  
N. MIAMI BEACH, FL 33179

SUBJECT: COMPLETE OFFICE SERVICES AND SUPPLIES LLC  
Ref. Number: L09000115584

We have received your document for COMPLETE OFFICE SERVICES AND SUPPLIES LLC and your check(s) totaling \$100.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You sent a form to revoke the dissolution of your llc. However, your llc is still active. If you wish to dissolve the company, please fill out the enclosed forms.

Please return the corrected original and one copy of 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) 245-6047.

Carolyn Lewis  
Regulatory Specialist II  
Registration/Qualification Section

Letter Number: 310A00007353

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Complete office Services and Supplies 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:

Shoshana Reiter  
(Name of Person)

LLC  
(Firm/Company)

1940 NE 194 Drive  
(Address)

N. Miami Beach, Florida 33179  
(City/State and Zip Code)

For further information concerning this matter, please call:

Shoshana Reiter at (305) 931-0593  
(Name of Person) (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

ARTICLES OF DISSOLUTION  
FOR  
A LIMITED LIABILITY COMPANY

FILED

2010 APR 19 PM 4:46

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is

Complete office services and supplies LLC

2. The Articles of Organization were filed on 12-03-09 and assigned document number

L09000115584

3. The date the dissolution was approved: 4-19-10

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).

Company was not activated at all.

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

Shoshana Reiter

Printed Name

SHOSHANA REITER