

L 100000019470

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

61-19470

(Document Number)

Certified Copies _____ Certificates of Status _____

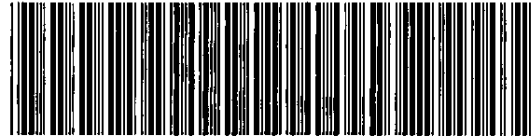
Special Instructions to Filing Officer:

A. LUNT

JAN 27 2010

EXAMINER

Office Use Only



000189048620

12/29/10--01010--010 **35.00

FILED
2011 JAN 26 PM 3:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Wrong form



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 10, 2011

BENJAMIN PATIENT
1289 S. KIRMAN RD #1165
ORLANDO, FL 32811

SUBJECT: INKLING L.L.C.
Ref. Number: L10000019470

We have received your document for INKLING L.L.C. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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) 245-6094.

Agnes Lunt
Regulatory Specialist II

Letter Number: 411A00000818

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Inklings 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:

Benjamin Patient (Name of)

(Name of Person)

1289 S. Kirkman Road # 1165

(Address)

Orlando FL 32811

(City/State and Zip Code)

For further information concerning this matter, please call:

Benjamin Patient
(Name of Person)

(Name of Person)

at (801) 318-8290

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☒ 30.00 Filing Fee &
Certificate of Status

Pre-paid

☐ \$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

ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED
DATE 08-28-2001 BY 60322 UCBAW

2011 JAN 26 PM 3:28

100

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

FILED
2011 JAN 26 PM 3:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is

Inking LLC

2. The Articles of Organization were filed on Feb 23rd 2010 and assigned document number

L1000009470

3. The date the dissolution was approved: 12/22/2010

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).

(1)(c) Upon The written consent of all of the members of the Limited
liability 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.

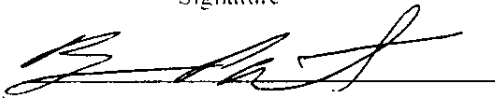
7. CHECK ONE:

- ☒ 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



Benjamin Patient

