L10000032809

| (Re | equestor's Name) | |
|--|---------------------|-----------|
| (Ac | ldress) | |
| (Ac | ldress) | · |
| | | |
| (Ci | ty/State/Zip/Phone | #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | isiness Entity Name | e) |
| (=- | - | -, |
| (Do | cument Number) | |
| | | |
| Certified Copies | _ Certificates | of Status |
| <u>. </u> | | |
| Special Instructions to | Filing Officer: | |
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Office Use Only



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FILED

11 OCT 26 MH to 27

SECRETARY OF STATE FALLAHASSEE, FLORID.

D. BRUCE

OCT 27 2011

EXAMINER



FLORIDA DEPARTMENT OF STATE Division of Corporations

October 18, 2011

DARCY SAULNIER 5601 NW 54 LANE TAMARAC, FL 33319

SUBJECT: RN INNOVATIONS, LLC

Ref. Number: L10000032809

FILED

11 OCT 26 AND 27

SECRETARY OF STATE FALLAHASSEE, FLORIDA

We have received your document for RN INNOVATIONS, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Number three of the document must contain the date the decision to dissolve was approved or became effective. This date must be prior to the date this document was submitted for filing.

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) 245-6984.

Deborah Bruce Regulatory Specialist II

Letter Number: 311A00023808

COVER LETTER

| TO: Registration Section Division of Corporations | | | | | |
|--|--|--|--|--|--|
| SUBJECT: 7 N Innovations, 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: | | | | | |
| | | | | | |
| Darry Saulnier (Name of Person) | | | | | |
| (Name of Person) | | | | | |
| LECAL DE LA LA CALLA DE LA CALLA DEL CALLA DE LA CALLA DEL CALLA DE LA CALLA DEL CALLA D | | | | | |
| (Firm/Company) | | | | | |
| SERVICE OF THE PROPERTY OF THE | | | | | |
| 5/01 nw 54 lane (Address) | | | | | |
| | | | | | |
| Tamarac, FL 33319 (City/State and Zip Code) | | | | | |
| (etg. state and dip ecolo) | | | | | |
| For further information concerning this matter, please call: | | | | | |
| Day y Saulnler at (954) 482-9532 (Area Code & Daytime Telephone Number) | | | | | |
| (Area Code & Daytime Telephone Number) | | | | | |
| Enclosed is a check for the following amount: | | | | | |
| \$25.00 Filing Fee \$\ \text{Certificate of Status} \text{S55.00 Filing Fee & Certified Copy (additional copy is enclosed)} \text{\$\frac{1}{2}\$}\$\$ \$60.00 Filing Fee, 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

| The name of a limited liability company is | | | |
|--|---|---------------------------------------|-------------|
| RN Innovations, LLC | | | |
| The Articles of Organization were filed on 3/34 | 1/10 | _ and assigned docume | ent number |
| The date the dissolution was approved: 10-1-1 | | • | |
| A description of occurrence that resulted in the limited 608.441, Florida Statutes, (copy 608.441 on back coverage) | l liability company's dis r letter). | solution pursuant to se | ection |
| moving out of State and | no longer | interested | in |
| CHECK ONE: All debts, obligations and liabilities of the lim OR- Adequate provision has been made for the deb | | • | _ |
| All remaining property and assets have been distribute rights and interests. | d among its members in | accordance with their | respective |
| CHECK ONE: | | | |
| There are no suits pending against the compar -OR- Adequate provision has been made for the sati entered against it in any pending suit. | | nt, order or decree which | ch may be |
| tures of the members having the same percentage of me | embership interests nece | essary to approve the d | issolution: |
| Signature | | Printed Name | |
| ary Danlowin | Darcy | SEGRETARY OF ALLIAHASSEE, | <u> </u> |
| | | Refer 27 OF STATE FUORIDA | D |
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