## 11000052588

(Requestor's Name)			
(A	ddress)		
(Address)			
(C	ity/State/Zip/Phone #	)	
PICK-UP	WAIT	MAIL	
(B	Business Entity Name)		
•			
(Document Number)			
•	,		
Certified Copies	Certificates of	Status	
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Special Instructions to Filing Officer:			
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Office Use Only



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SECKETARY OF STATE
TALL A HASSEE FLABRIDA

UD-57588

T. CLINE
DEC 20 2010
EXAMINER



## FLORIDA DEPARTMENT OF STATE Division of Corporations

November 22, 2010

DANNY CHANDLER 283 SPRINGDALE CIRCLE PALM SPRINGS, FL 33406

SUBJECT: REFUND RECOVERY INTERNATIONAL "L.L.C."

Ref. Number: L10000052588

We have received your document for REFUND RECOVERY INTERNATIONAL "L.L.C." and your check(s) totaling \$100.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

If you are trying to dissolve the LLC you have 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 of your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline Regulatory Specialist II

Letter Number: 310A00027335

## **COVER LETTER**

TO:

Registration Section Division of Corporations

Tallahassee, FL 32314

SUBJECT: REFUND RECOSERY IN  (Name of Limited)	ternational 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:	
Danny M. C.	HANDLON.	
(Tame C	013011)	
ROTENS ROWS	outpany)	
(,		
_ 283 SPRINGDAI	tress)	
(Add	dress)	
Palm SPRINGS (City/State a	Fi 33406 SSR 7	
(City/State a	nd Zip Code)	
	PH 2: 5	
For further information concerning this matter, please call:	্য প্ৰ	
Danny M. Cyano kon (Name of Person)	at (561) 236 4240	
(Name of Person)	(Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:		
	\$55.00 Filing Fee & S60.00 Filing Fee, Certified Copy Certificate of Status &	
, Community of Status	(additional copy is enclosed) Certified Copy (additional copy is enclosed)	
•	(additional copy is cholosed)	
MAILING ADDRESS:	STREET/COURIER ADDRESS:	
Registration Section	Registration Section	
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building	
T.O. DOX 0327	Cinton Dunding	

2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF DISSOLUTION

A LI	FOR IMITED LIABILITY COMPANY	TARY ASSE
1. The name of a limited liability com  REFUND RECOVERY	npany is	PH 12: 55
2. The Articles of Organization were fi	led on <u>5-/7-26/6</u> ar 	nd assigned document number
608.441, Florida Statutes, (copy 608	alted in the limited liability company's dissoluted on back cover letter).	
	FOR THEIR PERSONAL	
-OR-Adequate provision has been 6. All remaining property and assets ha rights and interests.  7. CHECK ONE:  There are no suits pending a -OR-	abilities of the limited liability company have n made for the debts, obligations and liabilities are been distributed among its members in accordance to the company in any court.  In made for the satisfaction of any judgment, oding suit.	es pursuant to s. 608.4421. cordance with their respective
Signature Signature  Signature	Pr	inted Name