

L10000105440

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

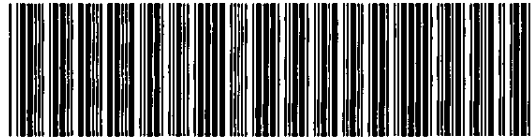
Special Instructions to Filing Officer:

L. SELLERS

JAN 18 2012

EXAMINER

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FILED
12 JAN 13 AM 11:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



January 9, 2012

Via US Mail

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

Re: Articles of Dissolution; MyChoiceWorks Reward Certificates, LLC.

Dear Sir or Madam:

Please find enclosed the Articles of Dissolution for a Limited Liability Company along with a Cover Letter and the appropriate fees for the filing and for a certificate of status. Please feel free to contact the undersigned to let me know if there is anything else required in this regard.

Yours Truly,

A handwritten signature in dark ink, appearing to read "Joshua S. Kritzer", is positioned above the typed name.

Joshua S. Kritzer, Esq.
Entertainment Benefits Group, LLC
19495 Biscayne Boulevard, Suite 600
Aventura, FL 33180
Tel. 305-907-5076
Fax. 305-907-5076
jkritzer@entertainmentbenefits.com

Enc

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MYCHOICEWORKS REWARD CERTIFICATES, 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:

Joshua S. Kritzer, Esq

(Name of Person)

Entertainment Benefits Group, LLC

(Firm/Company)

19495 Biscayne Blvd., Suite 600

(Address)

Aventura, FL 33180

(City/State and Zip Code)

For further information concerning this matter, please call:

Joshua S. Kritzer, Esq.

(Name of Person)

at (305) 9075076

(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

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TALLAHASSEE, FLORIDA

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

1. The name of a limited liability company is
MYCHOICEWORKS REWARD CERTIFICATES, LLC

2. The Articles of Organization were filed on **10/08/2010** and assigned document number
L10000105440

3. The date the dissolution was approved: **January 9, 2011**

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).

Upon the written consent of all of the Members of the above-mentioned 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.

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TALLAHASSEE, FLORIDA

Signatures of the members having the same percentage of membership interests necessary to approve dissolution:

Signature

Printed Name



Entertainment Benefits Group, LLC

