

L10000109029

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

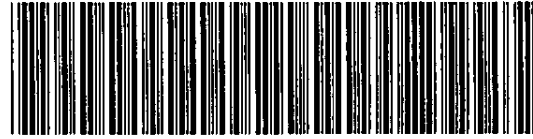
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

MAY -7 2013  
A. LUNT

Office Use Only



100246905461

05/02/13--01014--020 \*\$30.00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2013 MAY -2 PM 12:56

FILED

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** VALISTICS, 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:

MS. VALERIE KING  
(Name of Person)

VALISTICS, LLC  
(Firm/Company)

3352 SOUTH SEMORAN BLVD, #7  
(Address)

DRLAND, FL 32822  
(City/State and Zip Code)

2013 MAY -2 PM 12:56  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

For further information concerning this matter, please call:

MS. VALERIE KING at (414) 526-2917  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

p \$25.00 Filing Fee

p \$30.00 Filing Fee & Certificate of Status

p \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)

p \$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  
2013 MAY -2 PM 12:56  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is

VALISTICS, LLC

2. The Articles of Organization were filed on OCT 19, 2010 and assigned document number

L10000109029

3. The date the dissolution was approved: APRIL 28, 2013 (SUNDAY)

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).

lack of funds to continue business

~~\_\_\_\_\_~~  
~~\_\_\_\_\_~~  
~~\_\_\_\_\_~~  
~~\_\_\_\_\_~~

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  
Ms. Valerie King  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Printed Name  
Ms. Valerie King  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_