

LID 000132408

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

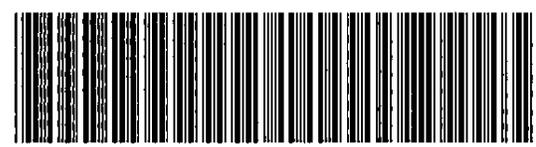
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only
G. MCLEOD
DEC 30 2010
EXAMINER



200188836682

12/27/10--01032--009 **125.00

FILED
10 DEC 27 AM 10:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

UTILITIES COLLECTIONS, INC.

**310 Larch Road
Ocala, FL 34480**

December 20, 2010

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

RE: Articles of Dissolution for Utilities Collections, Inc.
P08000097462

To Whom It May Concern:

Enclosed please find the Articles of Dissolution for Utilities Collections, Inc. effective December 31, 2010.

Please consider this letter formal notification that we guarantee to not revoke the dissolution. As well, please release the name to be used. The name is to be used for the new entity attached (see attached Articles of Organization).

Should you have any questions, please feel free to contact me at 352-347-8228.

Thank you.

Sincerely,



Dewaine Christmas
President

DC/pja
Enclosures

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: UTILITIES COLLECTIONS, LLC
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

JOHN Q. ADAMS II, CPA
Name of Person

ADAMS & COMPANY, P.A.
Firm/Company

910 SW 1ST AVENUE, STE. 201
Address

OCALA, FL 34471
City/State and Zip Code

SUNSHINEUTL@AOL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JOHN Q. ADAMS II, CPA at (**352**) **237-3200**
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- \$125.00 Filing Fee
- \$130.00 Filing Fee & Certificate of Status
- \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$160.00 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 ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

UTILITIES COLLECTIONS, LLC

(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

310 LARCH ROAD
OCALA, FL 34480

310 LARCH ROAD
OCALA, FL 34480

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

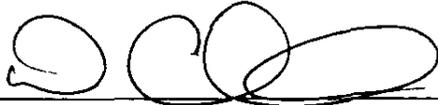
DEWAINE W. CHRISTMAS, SR.
Name

310 LARCH ROAD
Florida street address (P.O. Box **NOT** acceptable)

OCALA FL 34480
City, State, and Zip

FILED
10 DEC 27 AM 10:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..


Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

DEWAINE W. CHRISTMAS, SR.

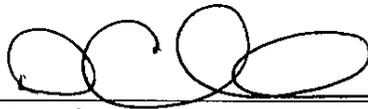
310 LARCH ROAD

OCALA, FL 34480

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: JANUARY 1, 2011. (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

DEWAINE W. CHRISTMAS, SR.

Typed or printed name of signee

Filing Fees:

- \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent**
- \$ 30.00 Certified Copy (Optional)**
- \$ 5.00 Certificate of Status (Optional)**



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 29, 2010

JOHN Q. ADAMS III, CPA
ADAMS & COMPANY, P.A.
910 SW 1ST AVE STE 201
OCALA, FL 34471

Re: Document Number P08000097462

The Articles of Dissolution dissolving UTILITIES COLLECTIONS, INC., a Florida corporation, were filed on December 27, 2010, effective December 31, 2010.

Should you have any questions regarding this matter, please telephone (850) 245-6050, the Amendment Filing Section.

Tina Roberts
Regulatory Specialist II
Division of Corporations

Letter Number: 310A00030045