

L11000043455

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : SMALL BUSINESS RESOURCES USA, INC.
Account Number : I20040000173
Phone : (407) 298-4646
Fax Number : (407) 297-0588

**LLC DISSOLUTION OR WITHDRAWAL
STRAIGHT LINE SOFTWARE, LLC**

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$30.00

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TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Straight Line Software, 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:

James K. Duerr, CPA

(Name of Person)

Small Business Resources USA, Inc.

(Firm/Company)

1601 Park Center Drive, Ste. 6A

(Address)

Orlando, FL 32835

(City/State and Zip Code)

For further information concerning this matter, please call:

James K. Duerr, CPA

(Name of Person)

at (407) 298-4646

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

\$25.00 Filing Fee and Certificate of Dissolution

\$55.00 Filing Fee, Certificate of Dissolution &
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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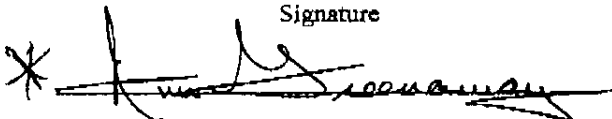
ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is
Straight Line Software, LLC
2. The Articles of Organization were filed on 04/11/2011 and assigned
document number L11000043455
3. The delayed effective date the dissolution if not effective on the date of filing: Immediately
4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section
605.0707, Florida Statutes, (copy 605.0707 on back cover letter).
The limited liability company is being dissolved upon the written consent of all
of its members.
5. If there are no members, enter the name and address of the person appointed to wind up the company's
activities and affairs:

6. Signature of an authorized person or if there are no members, the signature of the person appointed and listed
above to wind up the company's activities and affairs:

Signature

Printed Name

Ann Greenaway, MGRM

FILING FEE: \$25.00

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