

L11000048421

(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



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-- 11/26/12--01030--004 **25.00

FILED

12 DEC -6 PM 3:39

CLERK OF STATE
TALLAHASSEE, FLORIDA

B. BOSTICK

DEC - 7 2012

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ALTARAC HOME BUSINESS 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:

ALBERT A. ALTARAC

(Name of Person)

(Firm/Company)

2900 NORTH A1A, APT. 3A

(Address)

FORT PIERCE, FL 34949

(City/State and Zip Code)

For further information concerning this matter, please call:

ALBERT ALTARAC

(Name of Person)

at 772 489-5519

(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

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

12 DEC - 6 PM 3:39

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

1. The name of a limited liability company is
ALTARAC HOME BUSINESS LLC

2. The Articles of Organization were filed on APRIL 25, 2011 and assigned document number
L11000048421

3. The date the dissolution was approved: 11/15/2012

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).

Closed Business Due To Losses

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

Albert Altarac

Printed Name

ALBERT A ALTARAC



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 27, 2012

ALBERT A. ALTARAC
2900 NORTH A1A
APT. 3A
FT. PIERCE, FL 34949

SUBJECT: ALTARAC HOME BUSINESS LLC
Ref. Number: L11000048421

We have received your document for ALTARAC HOME BUSINESS LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A description of the occurrence that resulted in the limited liability company's dissolution pursuant to section 608.441, Florida Statutes, must be contained in the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Barbara Bostick
Regulatory Specialist II

Letter Number: 112A00028270