L11000117256

| (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: | | |
| | | |
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| | | |

Office Use Only



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02/25/13--01033--020 **25.00

SECRETARY OF STATE

C. LEWIS FEB 2 6 2013 EXAMINER

COVER LETTER

To:

Registration Section Division of Corporations

SUBJECT

SUCCESS HORIZONS 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:

| JACQUELINE A DAVIS | | |
|-----------------------|--|--|
| (Name of Person) | | |
| | | |
| (Firm/Company) | | |
| 1603 39TH AVE DR EAST | | |
| (Address) | | |
| FLIENTON FL 34222 | | |

(City/State and Zip Code)

For further information concerning this matter, please call:

JACQUELINE DAVIS

,,941

721-7505

(Name of Person)

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

ρ \$25.00 Filing Fee

ρ \$30.00 Filing Fee & Certificate of Status ρ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

ρ \$60.00 Filing Fee,
 Certificate of Status &
 Certified Copy
 (additional copy is enclosed)

MAILING ADDRESS:

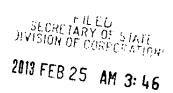
Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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

C. S. Proper



| 1. The name of a limited liability company is SUCCESS HORIZONS LLC | <u> </u> | |
|---|---|--|
| 2. The Articles of Organization were filed on 10/11/20 L11000117256 | 211 and assigned document number | |
| 3. The date the dissolution was approved: DECEMBE | ER 31,2012 | |
| 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). | | |
| | | |
| 5. CHECK ONE: | · | |
| -OR- | ots, obligations and liabilities pursuant to s. 608.4421. | |
| 6. All remaining property and assets have been distribute rights and interests. | ed among its members in accordance with their respective | |
| 7. CHECK ONE: | | |
| There are no suits pending against the compan-OR- Adequate provision has been made for the sati entered against it in any pending suit. | ny in any court. isfaction of any judgment, order or decree which may be | |
| Signatures of the members having the same percentage of me | embership interests necessary to approve the dissolution: | |
| Signature | Printed Name | |
| Jacqueline Pavis | JACQUELINE A DAVIS | |
| Ernest R. Derrie | ERNEST R DAVIS | |
| | | |
| | | |