

211000144077

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

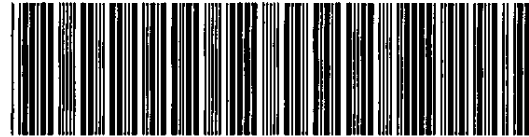
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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CLERK OF STATE
TALLAHASSEE FLORIDA

SEP 10 2014
J. BRUCE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CSC Solutions 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:

Cynthia Cage
(Name of Person)
CSC Solutions LLC
(Firm/Company)
317 Alkmaar St.
(Address)
Ellenton FL 34222
(City/State and Zip Code)

For further information concerning this matter, please call:

Cynthia Cage at (765) 438-6206
(Name of Person) (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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SEP 4 2014
CLERK OF SUPERIOR COURT

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

1. The name of a limited liability company is

CSC Solutions LLC

2. The Articles of Organization were filed on 12/27/2011 and assigned

document number L11000144077

3. The delayed effective date the dissolution if not effective on the date of filing: _____
(effective date cannot be prior to or more than 90 days later than date document is received for filing)

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).

ceased conducting business

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:

Cynthia Cage

317 Alkmaar St.

Ellenton, FL 34222

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:

Cynthia Cage
Signature

Cynthia Cage
Printed Name

FILING FEE: \$25.00

2014 SEP -4 AM 10:42
CLERK OF DISTRICT COURT
TALLAHASSEE FL 32304

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