

L12 000000930

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

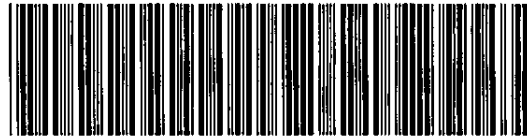
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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JAN 15 2014

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2014 JAN 13 PM 2:58
JAN 13 2014

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: The Pointtalker, LLC
(Name of Limited Liability Company)

L 12000000930

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

Please return all correspondence concerning this matter to the following:

Robert L. Schattner

(Name of Person)

The Pointtalker, LLC

(Firm/Company)

11110 Boca Woods Lane

(Address)

Boca Raton, FL 33428

(City/State and Zip Code)

2014 JAN 13 PM 2:50
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For further information concerning this matter, please call:

Robert L. Schattner

(Name of Person)

at 561 3928210

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount: CHECK 789
\$25.00 Filing Fee and Certificate of Dissolution 1.9.14

\$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

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

1. The name of a limited liability company is

The Pointtalker, LLC

L12000000930

2. The Articles of Organization were filed on 09/12/12 and assigned
document number 60-8015991815-1

3. The delayed effective date the dissolution if not effective on the date of filing: 12/12/13

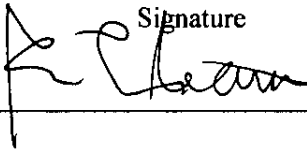
4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).

Lack of interest in products

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

ROBERT L. SCHATTNER

FILING FEE: \$25.00