

# L12000053385

\_\_\_\_\_  
(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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FILED  
2014 MAR 14 PM 3:49  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

N. Outagam MAR 18 2014

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** The Open Box Store 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:

Thomas Grey

(Name of Person)

The Open Box Store LLC

(Firm/Company)

13303 Lake Butler Blvd

(Address)

Winter Garden, FL, 34787

(City/State and Zip Code)

For further information concerning this matter, please call:

Thomas Grey

(Name of Person)

at ( 407 ) 2427 702

(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

ARTICLES OF DISSOLUTION  
FOR  
A LIMITED LIABILITY COMPANY

FILED

2014 MAR 14 PM 3:49

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is

The Open Box Store LLC

2. The Articles of Organization were filed on 04/19/2012 and assigned  
document number L12000053385

3. The delayed effective date the dissolution if not effective on the date of 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).

BUSINESS CEASED TRADING

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

THOMAS GREY



THOMAS GREY

FILING FEE: \$25.00