

#L12000070489

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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2014 JUN -2 PM 4:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
EXAMINER

JUN -9 2014

~~12000070489~~



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 9, 2014

JODY L SMITH
RE: SMITHIBS
628 HARTLEY PL.
THE VILLAGES, FL 32162

SUBJECT: SMITHIBS LLC
Ref. Number: L12000070489

We have received your document for SMITHIBS 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):

We are enclosing the proper form(s) with instructions for your convenience.

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.

Karen A Saly
Regulatory Specialist II

Letter Number: 214A00010027



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 31, 2014

JODY L SMITH
RE: SMITHIBS
628 HARTLEY PL.
THE VILLAGES, FL 32162

SUBJECT: SMITHIBS LLC
Ref. Number: L12000070489

We have received your document for SMITHIBS LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

Articles of Dissolution must be filed before the articles of Termination can be filed. Enclosed are articles of Dissolution for your convenience.

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.

Karen A Saly
Regulatory Specialist II

Letter Number: 614A00006787

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Smith IBS 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:

Jody L. Smith
(Name of Person)

Integrity Business Solutions
(Firm/Company)

628 Hartley Pl.
(Address)

The Villages, FL 32162
(City/State and Zip Code)

For further information concerning this matter, please call:

Jody Smith at (309) 370-7218
(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

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

FILED

2014 JUN -2 PM 4:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is

SMITHIBS LLC

2. The Articles of Organization were filed on 8/1/12 and assigned

document number L12000070489

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).

Business was not profitable
~~expenses~~ for over a year.

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

Jody Smith
628 Hartley Pl.
The Villages, FL 32162

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:

Jody L. Smith
Signature

Jody L. Smith
Printed Name

FILING FEE: \$25.00