

L12 000096396

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

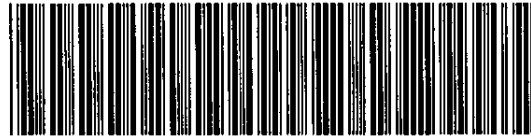
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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01/02/14--01007--003 \*\*25.00

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JAN 30 PM 4:26  
SECRETARY OF STATE  
CLARK COUNTY, ARIZONA

FEB - 3 2014

T CLINE



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 8, 2014

DZMITRY BARAVITCHANKA  
1835 E HALLANDALE BEACH, STE 533  
HALLANDALE, FL 33009

SUBJECT: WEBMASTER SERVICE LLC  
Ref. Number: L12000096396

We have received your document for WEBMASTER SERVICE 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):

A description of the occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707(1)(c), Florida Statutes, must be contained in the document.

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.

Tammi Cline  
Regulatory Specialist II

Letter Number: 014A00000497

SECRETARY OF STATE  
JAN 14 2014 11:27 AM

2014 JAN 30 PM 4: 27

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** WEBMASTER SERVICE 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:

DZMITRY BARAVITCHANKA

(Name of Person)

WEBMASTER SERVICE LLC

(Firm/Company)

1835 E HALLANDALE BEACH, STE 533

(Address)

HALLANDALE, FL 33009

(City/State and Zip Code)

For further information concerning this matter, please call:

DZMITRY BARAVITCHANKA at ( 954 ) 456-7474  
(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

FILED  
2014 JAN 30 PM 4:27  
SECRETARY OF STATE  
TALLAHASSEE, FL 32301

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

1. The name of a limited liability company is  
WEBMASTER SERVICE LLC
2. The Articles of Organization were filed on JULY 25, 2012 and assigned  
document number L12000096396
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 was not successful

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

Dzimitry BARQVITCHAN

**FILING FEE: \$25.00**

2014 JAN 30 PM 4: 27  
SECRETARY OF STATE  
TALLAHASSEE, FL 32310

FILED