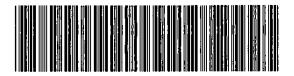
120001422

(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



300246527423

APR 25 2013 T CLINE

ACCOUNT	NO.	:	120000000195

REFERENCE : 614456 793

AUTHORIZATION :

COST LIMIT : \$ 25/00

ORDER DATE : April 17, 2013

ORDER TIME : 8:37 AM

ORDER NO. : 614456-011

CUSTOMER NO: 7911994

DOMESTIC FILINGS

NAME: PENS AND ACCESSORIES, LLC

XX ARTICLES OF DISSOLUTION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight - EXT# 52956

EXAMINER'S INITIALS:

RETARY OF STA AHASSEE, FLOR

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

The name of a limited liability company is PENS AND ACCESSORIES, LLC		-
2. The Articles of Organization were filed on 11	1-09-2012	and assigned document numbe
3. The date the dissolution was approved: 15 No	ov. 2012	
4. A description of occurrence that resulted in th 608.441, Plorida Statutes, (copy 608.441 on b.	e limited liability co	ompany's dissolution pursuant to section
Lack of sales, lost of profits and the listing fee's	•	So, I took a major lost. Plus, I'm in the
process of a divorce.		
5. CHECK ONE:		
	f the limited liability	y company have been paid or discharged.
-OR-		ons and liabilities pursuant to s. 608.4421.
 All remaining property and assets have been d rights and interests. 	istributed among its	members in accordance with their respective
7. CHECK ONE:		
There are no suits pending against the -OR-	company in any co	urt.
	r the satisfaction of a	any judgment, order or decree which may be
natures of the members having the same percenta	ge of membership i	nterests necessary to approve the dissolution:
Signature		Printed Name
Glar F. Vet	Olifi	lo Reyes
1		

FILING FEE: \$25.00