# L13000110968

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DIVISION OF CONVORTING

4-24-15

# **COVER LETTER**

Division of Corporations	
SUBJECT: LIQUIDATION SOLUTIONS, LLC (Name of Limited Liability Company)	
(Name of Limited Liability Company)	
The enclosed Articles of Dissolution and fee(s) are submitted for filing.	

Scott KREMSER
. (Name of Person)
LIQUIDATION SOLUTIONS, LLC
(Firm/Company)

20241 ESTERD GARDENS CIRCLE #/03
(Address)

ESTERD, FLORIDA 33928
(City/State and Zip Code)

For further information concerning this matter, please call:

Please return all correspondence concerning this matter to the following:

(Name of Person) at (239) 470 - 398 4 (Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

Registration Section

\$25.00 Filing Fee and Certificate of Dissolution

\$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)

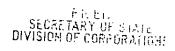
### **MAILING ADDRESS:**

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



15 APR 10 PH 2: 44

ł.	The name of a limited liability company is
	LIQUIDATION SOLUTIONS, LLC
2.	The Articles of Organization were filed on Aug 6, 20/3 and assigned
	document number <u>L /3000// 0963</u>
3.	The delayed effective date the dissolution if not effective on the date of filing: 4/10/15 (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).
	The company has NO bow, NOSS and WAS
	NOT ABLE TO SUSTAIN INCOME.
5.	If there are no members, enter the name and address of the person appointed to wind up the company's
	activities and affairs: Scott Kremser
	20241 ESTELD GALDELS C.RCLE #103
	ESTERD, FL 33928
6. lis	Signature of an authorized person or if there are no members, the signature of the person appointed and sted above to wind up the company's activities and affairs:
,	Dello Soft Krénies
_	Signature Printed Name

FILING FEE: \$25.00