

Feb. 5 2014 12:22/2014

L13000134996

Division of Corporations

4287 P. 1

Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : ADVANCE CORPORATE SERVICE, INC.
Account Number : I20070000146
Phone : (305) 406-3800
Fax Number : (305) 406-3999

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14 FEB -5 PM 4: 37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LLC DISSOLUTION OR WITHDRAWAL PRINTERLINK LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2014 FEB -5 AM 9: 42

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FEB - 6 2014

T. HAMPTON

Feb. 5, 2014 4:14 PM

1/23/2014 8:21:08 AM PAGE 1/001 Fax No. 4287 P. 2



January 23, 2014

FLORIDA DEPARTMENT OF STATE
Division of Corporations

PRINTERLINK LLC
8548 NW 66TH ST
DORAL, FL 33166US

SUBJECT: PRINTERLINK LLC
REF: L13000134996

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the correct form(s).

Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tammy Hampton
Regulatory Specialist III

FAX Aud. #: H14000017322
Letter Number: 714A00001505

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

P.O. BOX 6327 - Tallahassee, Florida 32314

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is
PRINTERLINK LLC
2. The Articles of Organization were filed on 12/31/2013 and assigned
document number L13000134996
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).
Disagreement between parties.
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

Roguo Mourais

De Mourais, Rosangela

FILING FEE: \$25.00

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TALLAHASSEE, FLORIDA

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