

# L13000149901

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

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

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

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

☐ PICK-UP    ☐ WAIT    ☐ MAIL

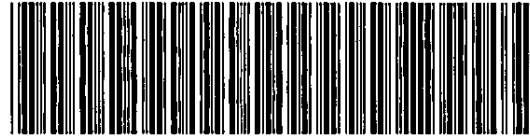
\_\_\_\_\_  
(Business Entity Name)

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

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

Special Instructions to Filing Officer:

Office Use Only



000259549180

EFFECTIVE DATE  
4-30-2014

04/29/14--01008--013 \*\*25.00

FILED

2014 APR 29 PM 4:10

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

K. SALY  
EXAMINER

MAY - 6 2014

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** ORLANDO PRINT HOUSE 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:

Gavin Seepersad

(Name of Person)

(Firm/Company)

6402 Inca st

(Address)

Orlando FL 32807

(City/State and Zip Code)

For further information concerning this matter, please call:

Gavin Seepersad

(Name of Person)

407

at ( )

924-7570

(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

EFFECTIVE DATE  
4-30-2014

ARTICLES OF DISSOLUTION  
FOR  
A LIMITED LIABILITY COMPANY

FILED  
2014 APR 29 PM 4:10  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is  
ORLANDO PRINT HOUSE LLC.

2. The Articles of Organization were filed on 10/24/2013 and assigned  
document number L13000149901

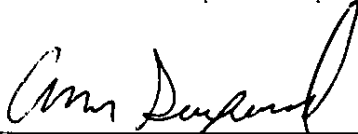
3. The delayed effective date the dissolution if not effective on the date of filing: 4/30/2014  
(effective date cannot be prior to or more than 90 days later than date document is received for filing)

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 business was a failure and no more business activities are being done.

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

Gavin Seepersad

Printed Name

FILING FEE: \$25.00