

L13000155381

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

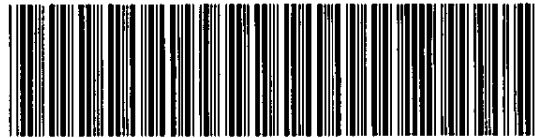
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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01/27/15--01033--014 **25.00

FILED

15 JAN 27 PM 2:45

CLERK OF STATE
TALLAHASSEE, FLORIDA

JAN 30 2015

T. BROWN

CT Corporation System

515 E. Park Ave., Tallahassee, FL 32301

850-205-8842

THE OLOFSON GROUP, LLC

L13000155381

Thank you!

<input type="checkbox"/> Profit	<input type="checkbox"/> Amendment	<input type="checkbox"/> Merger
<input type="checkbox"/> Nonprofit		
<input type="checkbox"/> Foreign	<input checked="" type="checkbox"/> Dissolution/Withdrawal	<input type="checkbox"/> Mark
	<input type="checkbox"/> Reinstatement	
<input type="checkbox"/> Limited Partnership	<input type="checkbox"/> Annual Report	<input type="checkbox"/> Other
<input checked="" type="checkbox"/> LLC	<input type="checkbox"/> Name Registration	
<input type="checkbox"/> Cancellation	<input type="checkbox"/> Fictitious Name	<input type="checkbox"/> UCC
<input type="checkbox"/> Certified Copy	<input type="checkbox"/> Photocopies	<input type="checkbox"/> CUS
<input type="checkbox"/> Call When Ready	<input type="checkbox"/> Call If Problem	
<input checked="" type="checkbox"/> Walk In	<input type="checkbox"/> Will Wait	<input checked="" type="checkbox"/> Pick Up
<input type="checkbox"/> Mail Out		

Name _____
Availability _____
Document _____
Examiner _____
Updater _____
Verifier _____
W.P. Verifier _____

1/27/2015

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Order#:
9419946

Ref#: _____

Amount: \$ _____



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 28, 2015

C T CORPORATION SYSTEM

TALLAHASSEE, FL

SUBJECT: THE OLOFSON GROUP, LLC
Ref. Number: L13000155381

RE-SUBMIT

Please retain original filing
date of submission 1/27

We have received your document for THE OLOFSON GROUP, 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):

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.

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.

Teresa Brown
Regulatory Specialist II

Letter Number: 315A00001677

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
15 JAN 29 PM 2:00
NOT INTENDED
TO ACKNOWLEDGE
SUFFICIENCY OF FILING

**ARTICLES OF DISSOLUTION
OF
THE OLOFSON GROUP, LLC**

FILED
15 JAN 27 PM 2:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to the provisions of the Florida Limited Liability Company Act, the undersigned limited liability company adopts the following Articles of Dissolution for the purpose of dissolving the referenced Company:

ARTICLE I - NAME

The name of the Company is THE OLOFSON GROUP, LLC

ARTICLE II - DISSOLUTION

Pursuant to the authority contained in Section 605 of the Florida Statutes, the sole Member of the Company entitled to vote thereon elected to dissolve the Company, by written consent in lieu of a special meeting, dated November 1, 2014.

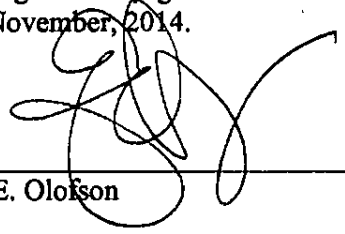
The Company has terminated its business.

All debts, obligations, and liabilities of the Company have been paid or discharged.

All remaining property and assets of the Company have been distributed to the Members in accordance with their respective rights and interests.

There are no suits pending against the Company in any court.

IN WITNESS WHEREOF, the undersigned, being the Manager of the Company, has executed these Articles of Dissolution this 1 day of November, 2014.



Eric E. Olofson