

L14000087316

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

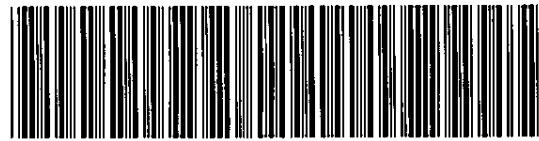
(Business Entity Name)

(Document Number)

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

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04/30/15--01001--001 \*\*25.00

RECEIVED

DEPARTMENT OF STATE  
DIVISION OF CORPORATE  
REGISTRATION

15 APR 29 PM 1:24

TO ACKNOWLEDGE  
SUFFICIENCY OF FILING

FILED

15 APR 29 PM 1:58

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

TO: Registration Section  
Division of Corporations

SUBJECT: Living Line 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:

Darren Rajendranath  
(Name of Person)

Living Line LLC.  
(Firm/Company)

3065 Highland Oaks Terr  
(Address)

Tallahassee FL 32301  
(City/State and Zip Code)

For further information concerning this matter, please call:

Darren Rajendranath at ( 786 ) 897-0050  
(Name of Person) (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

ARTICLES OF DISSOLUTION  
FOR  
A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is

Livline LLC.

2. The Articles of Organization were filed on 05/30/2014 and assigned  
document number L140000 87316

3. The delayed effective date the dissolution if not effective on the date of filing: 4/29/2015

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).

Company no longer Active.

5. If there are no members, enter the name and address of the person appointed to wind up the company's  
activities and affairs:

Darren Rajendranath  
Clayton Knowles  
2247 Sandpiper St  
Tallahassee FL 32303

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 [Signature]

Printed Name

Darren Rajendranath

FILING FEE: \$25.00

FILED  
15 APR 29 PM 1:53  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA