

L14000142087

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

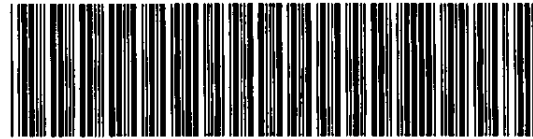
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2017 JAN 27 P 12:29

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D. BRUCE  
JAN 30 2017

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Industrial Packaging Plus, 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:

John M. Campbell, Jr., Esquire

(Name of Person)

Nelson Mullins Riley & Scarborough LLP

(Firm/Company)

104 S. Main Street, Suite 900

(Address)

Greenville, SC 29601

(City/State and Zip Code)

For further information concerning this matter, please call:

John M. Campbell, Jr., Esquire at 864 373-2234  
(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

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TALLAHASSEE, FLORIDA

**ARTICLES OF DISSOLUTION  
FOR  
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is  
Industrial Packaging Plus, LLC
2. The Articles of Organization were filed on September 10, 2014 and assigned  
document number L14000142087
3. The delayed effective date the dissolution if not effective on the date of filing: \_\_\_\_\_  
(effective date cannot be prior to or more than 90 days later than date document is received for filing)  
**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be  
listed as the document's effective date on the Department of State's records.
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 consent of all the members.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
5. If there are no members, enter the name and address of the person appointed to wind up the company's  
activities and affairs: N/A  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
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

Jerry W. Murdock

\_\_\_\_\_  
Printed Name

**FILING FEE: \$25.00**

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JAN 27 12:29  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

## Notice of Limited Liability Company Dissolution

**NOTE: This page is optional**

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company: Industrial Packaging Plus, LLC

L14000142087

Document number of Limited Liability Company is: \_\_\_\_\_

January 1, 2017

Date of dissolution was: \_\_\_\_\_

Description of information that must be included in a written claim:

Any such claim just set forth the following information: (i) a description of the claim, including a

reasonable explanation of the basis of such claim (including a description of the material asserted facts

and circumstances underlying such claim); (ii) the dollar amount of such claim; and (iii) the address,

phone number and email address of the person authorized to act as the claimant's representative with

respect to such claim.

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

Industrial Packaging Plus, LLC

Attn: Jerry W. Murdock

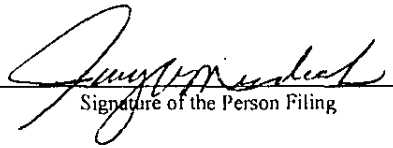
10 Jack Casey Court

Fountain Inn, SC 29644

A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Jerry W. Murdock

Printed Name of the Person Filing

  
Signature of the Person Filing

**Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00**

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

FILED