

L14000144383

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

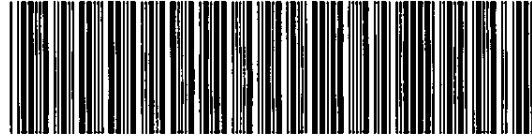
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

N. Outigan FEB 23 2015

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: POSITIVE PARTNERS 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:

JANET COSTELOW

(Name of Person)

(Firm/Company)

P.O. Box 6044

(Address)

WANTIRNA VICTORIA 3152 AUSTRALIA

(City/State and Zip Code)

For further information concerning this matter, please call:

JAN COSTELOW

(Name of Person)

at

(61) 411803317

(Area Code & Daytime Telephone Number)

(AUSTRALIA)
CELL

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

POSITIVE PARTNERS LLC

2. The Articles of Organization were filed on SEPTEMBER 16, 2014 and assigned

document number L14000144383

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)

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).

NOT ACTIVE IN DOING ANY BUSINESS HAS NOT GENERATED

ANY INCOME SINCE INCORPORATION - IS NOT REQUIRED

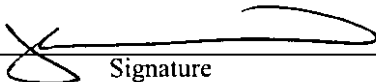
5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:

JANET COSTELOW

PO Box 6044

WANTANA VIC 3152 AUSTRALIA

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

JANET COSTELOW

Printed Name

FILING FEE: \$25.00