

L 990000004016

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

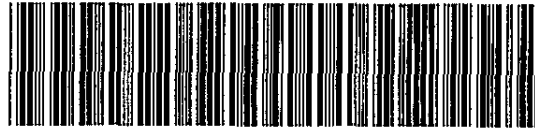
(Document Number)

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06/09/04--01044--005 \*\*30.00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

04 JUL -1 AM 10:13

FILED

Trademark Enterprises, LLC  
660 Tamiami Trail North  
Naples, Florida 34102  
239-435-9500

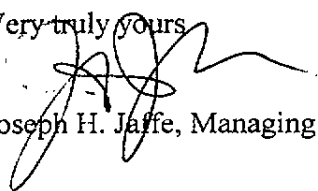
June 7, 2004

Division of Corporations  
Registration Section  
P. O. Box 6327  
Tallahassee, Florida 32314

Dear Sir or Madam:

Enclosed is our form and check for the dissolution of Trademark Enterprises, and for a  
certified copy of same.  
Thank you for your assistance

Very truly yours,

  
Joseph H. Jaffe, Managing Member

**FILED**  
04 JUL - 1 AM 10:13  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State

June 11, 2004

TRADEMARK ENTERPRISES, LLC  
660 TAMiami TRAIL NORTH  
NAPLES, FL 34102

SUBJECT: TRADEMARK ENTERPRISES, LLC  
Ref. Number: L99000004016

We have received your document for TRADEMARK ENTERPRISES, LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Number two of the document must contain the date the decision to dissolve was approved or became effective. This date must be prior to the date this document was submitted for filing.

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) 245-6097.

Marsha Thomas  
Document Specialist

Letter Number: 304A00039616

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

1. The name of the limited liability company is Trademark Enterprises, LLC

2. The effective date of the limited liability company's dissolution is June 30, 2004

3. A description of the occurrence that resulted in the limited liability company's dissolution pursuant to  
Section 608.441, Florida Statutes, (copy of 608.441 on back of cover letter).

All obligations have been paid and all assets distributed

4. **CHECK ONE:**

☒ All debts, obligations and liabilities of the limited liability company have been paid or discharged.

-OR-

☐ Adequate provision has been made for the debts, obligations and liabilities pursuant to s. 608.4421.

5. All remaining property and assets have been distributed among its members in accordance with their  
respective rights and interests.

6. **CHECK ONE:**

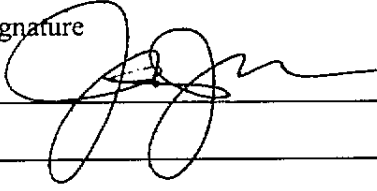
☒ There are no suits pending against the company in any court.

-OR-

☐ Adequate provision has been made for the satisfaction of any judgment, order or decree, which may  
be entered against it in any pending suit.

Signatures of the members having the same percentage of membership interests necessary to approve the  
dissolution:

Signature

  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Typed or Printed name

Joseph H. Jaffe  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

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**FILED**

Filing Fee: \$25.00