

PO9000069663

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

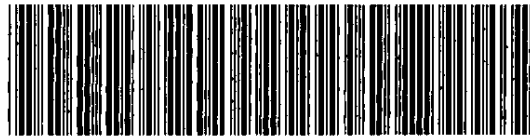
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 MAY -6 AM 9:22

diss
C.COULLIETTE

MAY 06 2010

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ANDARNELL, INC

(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:

ANDREA DARNELL

(Name of Person)

ANDARNELL, INC

(Firm/Company)

5590 NW 61 STREET, #823

(Address)

COCONUT CREEK, FL 33073

(City/State and Zip Code)

For further information concerning this matter, please call:

ANDREA DARNELL

(Name of Person)

at (954) 638-6648

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☒ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 22, 2010

ANDREA DARNELL
ANDARNELL, INC
5590 NW 61 ST #823
COCONUT CREEK, FL 33073

SUBJECT: ANDARNELL, INC.
Ref. Number: P09000069663

We have received your document for ANDARNELL, INC. and check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is a balance due of \$5.00. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

You have used the form to file an amendment for a Limited Liability Company, you are filed with this office as a Florida profit corporation. I have enclosed the proper form for you to complete and return with the addition fees needed.

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) 245-6903.

Cheryl Coulliette
Regulatory Specialist II

Letter Number: 610A00009929

RECEIVED
2010 MAY -5 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Dissolution

DOCUMENT NUMBER: P09000069663

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ANDREA DARNELL
(Name of Contact Person)

ANDARNELL, INC.
(Firm/Company)

5590 NW 61 Street, #823
(Address)

Coconut Creek, FL 33073
(City/State and Zip Code)

For further information concerning this matter, please call:

ANDREA DARNELL at (954) 638-6648
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status ☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) ☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)

MAILING ADDRESS:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST: The name of the corporation as currently filed with the Florida Department of State:

ANDARNELL, INC.

SECOND: The document number of the corporation (if known): P09000069663

THIRD: The date dissolution was authorized: April 14, 2010

Effective date of dissolution if applicable: April 14, 2010
(no more than 90 days after dissolution file date)

FOURTH: Adoption of Dissolution (CHECK ONE)

☒ Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.

☐ Dissolution was approved by the shareholders through voting groups.

The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:

The number of votes cast for dissolution was sufficient for approval by

(voting group)

Signature: _____

(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)

ANDREA DARNELL
(Typed or printed name of person signing)

PRESIDENT
(Title of person signing)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 MAY -6 AM 9:22

Filing Fee: \$35