

STATE OF ALABAMA

DOMESTIC LIMITED LIABILITY COMPANY (LLC)
ARTICLES OF DISSOLUTION



20150506000148500 1/2 \$158.00
Shelby Cnty Judge of Probate, AL
05/06/2015 11:49:28 AM FILED/CERT

PURPOSE: In order to dissolve a Limited Liability Company (LLC) under Section 10A-1-9.11 and 10A-5- 7.06 of the Code of Alabama 1975 these Articles of Dissolution and the appropriate filing fees must be filed with the Office of the Judge of Probate in the county where the LLC's Certificate of Formation was recorded. The information required in this form is required by Title 10A.

INSTRUCTIONS: Mail one (1) signed original and two (2) copies of this completed form and the appropriate filing fees to the Office of the Judge of Probate in the county where the

Limited Liability Company's Certificate of Formation was recorded. Contact the Judge of Probate's Office to determine the county filing fees. Make a separate check or money order payable to the **Secretary of State for the state filing fee of \$100.00** and the Judge of Probate's Office will transmit the fees along with a certified copy of the Articles of Dissolution to the Office of the Secretary of State within 10 days after the filing is recorded. Once the Secretary of State's Office has indexed the filing, the information will appear at www.sos.alabama.gov under the Government Records tab and the Business Entity Records link – you may search by entity name or number. You may pay the Secretary of State fees by credit card if the county you are filing in will accept that method of payment (see attached). Your dissolution will not be indexed if the credit card does not authorize and will be removed from the index if the check is dishonored.

(For County Probate Office Use Only)

This form must be typed or laser printed.

1. The name of the Limited Liability Company as recorded on the Certificate of Formation:

Pencil Worx, LLC

2. Alabama Entity ID Number (Format: 000-000): 330 - 767 **INSTRUCTION TO OBTAIN ID NUMBER TO COMPLETE FORM:** If you do not have this number immediately available, you may obtain it on our website at www.sos.alabama.gov under the Government Records tab. Click on Business Entity Records, click on Entity Name, enter the registered name of the entity in the appropriate box, and enter. The six (6) digit number containing a dash to the left of the name is the entity ID number. If you click on that number, you can check the details page to make certain that you have the correct entity – this verification step is strongly recommended.

(For SOS Office Use Only)

This form was prepared by: (type name and full address)

Carol Murphy
111 walters cove
sterrett al 35147

DOMESTIC LIMITED LIABILITY COMPANY (LLC) CERTIFICATE OF FORMATION



20150302000062770 2/3 \$158.00
Shelby Cnty Judge of Probate, AL
03/02/2015 10:37:31 AM FILED/CERT

3. The name of the Registered Agent: Carol Murphy

Street (No PO Boxes) address of Registered Office (must be located in Alabama):

111 Walters Cove, Sterrett, Alabama 35147



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Mailing address of Registered Office (if different from street address): _____

4. There is at least one member of the limited liability company.

5. The filing of the limited liability company is effective immediately on the date filed by the Judge of Probate or at the delayed filing date (later date) specified in this filing (no more than 90 days after date of signing of this document). 10A-1-4.12

The undersigned specify ____ / ____ / ____ as the effective date (must be on or after the date filed in the office of the county Judge of Probate, but not more than 90 days after the date of signing of the document) and the time of filing to be ____ : ____ AM

☐ Attached are any other matters the members determine to include herein and/or, if applicable, any statements required to meet 10A-5A-11.02(b)(3) requirements.

2 / 16 / 2015

Date (MM/DD/YYYY)

Signature as required by 10A-5A-2.04

Cheyenne Moseley, Assistant Secretary

Typed Name of Above Signature

LegalZoom.com, Inc., Organizer

Typed Title (Organizer or Attorney-in-fact)

Additional Organizers may sign (add additional sheets if necessary).

/ /

Date (MM/DD/YYYY)

Signature as required by 10A-5A-2.04

Typed Name of Above Signature

Typed Title (Organizer or Attorney-in-fact)