W5000024619

| (Requestor's Name) | |
|----------------------------------------------------------------------------------|--------|
| (Address) | 7000 |
| (Address) | |
| (City/State/Zip/Phone #) | |
| (Business Entity Name) (Document Number) | |
| Certified Copies Certificates of Status Special Instructions to Filing Officer: | 07/01/ |
| 1/1 diss | |
| Office Use Only | |



700056688127

M. HODGEŞ

07/01/05--01017--002 **25.00

TRANSMITTAL LETTER

| | TO: Registration Section Division of Corporations | | | |
|---------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------|------|--|--|
| | | | | |
| SUBJECT: | (Name of Limited Liability Company) | | | |
| | (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: | | | | |
| RAM LALEHANDANI (Name of Person) | | | | |
| (Firm/Company) | | | | |
| | | | | |
| 11555 HERON BAY BLUD SUITE 200 (Address) | | | | |
| (Address) | | | | |
| CORAL SPRINGS FL 33076 (City/State and Zip Code) | | | | |
| (City/State and Zip Code) | | | | |
| | | | | |
| For further information concerning this matter, please call: | | | | |
| | | | | |
| (Name of Person) at (964) 193 3068 (Area Code & Daytime Telephone Number) | | | | |
| | | | | |
| Parala and in a s | hards from the fall and an arrange to | | | |
| | heck for the following amount: g Fee | | | |
| \$25.00 FIM | Certificate of Status Certified Copy Certificate of Status & Cadditional copy is enclosed) Certified Copy (additional copy is enclosed) | sed) | | |
| | STREET ADDRESS: MAILING ADDRESS: Registration Section Registration Section | | | |
| | Registration Section Registration Section | | | |

Registration Section
Division of Corporations
409 E. Gaines Street

Tallahassee, Florida 32399

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

ARTICLES OF DISSOLUTION FOR A FLORIDA LIMITED LIABILITY COMPANY

| 1. The name of the limited liability company is | | | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------|--|--|--|
| ANJALI EXPORT LLC | · | | | |
| 2. The date the dissolution was approved: June 27 TH 2005 | | | | |
| 3. A description of the occurrence that resulted in th section 608.441, Florida Statutes, (copy of 608.44) | | | | |
| PARTHERSHIP WAS D | issolved | | | |
| | | | | |
| 4. CHECK ONE: All debts, obligations and liabilities of the limited OR- Adequate provision has been made for the debts, | obligations and liabilities pursuant to s. 608.4421. | | | |
| All remaining property and assets have been distr respective rights and interests. | notified among its members in accordance with their | | | |
| 6. CHECK ONE: There are no suits pending against the company in -OR- | n any court. | | | |
| 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 percenthe dissolution: | stage of membership interests necessary to approve | | | |
| Signature | Typed or Printed name RAM LALCHANDANI | | | |
| Mani De | INACINALA LA LENANDANI | | | |
| | | | | |
| | | | | |

Filing Fee: \$25.00