<u>L0700008993</u>

| (Requestor's | Name) | |
|---|---------------------|--|
| (Address) | | |
| (Address) | | |
| (City/State/Zi | p/Phone #) | |
| PICK-UP W | AIT MAIL | |
| (Business En | tity Name) | |
| (Document Number) | | |
| Certified Copies Cer | tificates of Status | |
| Special Instructions to Filing Officer: | | |
| | | |
| | | |
| | | |
| | | |

G. MCLEODIY MAR - 4 2010 EXAMINER



200166260362

02/08/10--01058--018 **35.00

DIVISION OF CORPORATIONS

10 MAR -3 PM 12: 06

COVER LETTER

| | tion Section of Corporations | | |
|---------------------------------|--|---|--|
| SUBJECT: | NTENSE How (Name of Limited | ME, LLC d Liability Company) | |
| The enclosed Arti | icles of Dissolution and fee(s) are submitte | ed for filing. | |
| Please return all c | correspondence concerning this matter to the | he following: | |
| - | MATTHEW (Name | OVERMYER e of Person) | · |
| INTENSE HOME LLC (Firm/Company) | | | |
| - | 1155 Ros | EMARY CT, #20 | 02 |
| - | NAPLES, (City/State | FC 34103 e and Zip Code) | |
| For further inform | nation concerning this matter, please call: | | |
| <u>M</u> | ATTHEW CYBENYER (Name of Person) | at (239) 776 (Area Code & Daytime | 2 - 5/8/89 c Telephone Number) |
| Enclosed is a check | for the following amount: | | |
| \$25.00 Filing Fe | e 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) |
| | , | omprem/coll | DIED ADDRESS. |

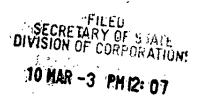
MAILING ADDRESS:

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

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY



| 1. The name of a limited liability company is | E Home, LLC |
|---|---|
| 2. The Articles of Organization were filed onO1 | -24-2007 and assigned document number |
| 3. The date the dissolution was approved: 12-7 | 31-2009 |
| 4. A description of occurrence that resulted in the limit 608.441, Florida Statutes, (copy 608.441 on back co | |
| CLOSE OF BUSINESS, LAC | CK OF CLIENTS |
| | |
| 5. CHECK ONE: | · · · · · · · · · · · · · · · · · · · |
| OR- Adequate provision has been made for the d | mited liability company have been paid or discharged. lebts, obligations and liabilities pursuant to s. 608.4421. |
| All remaining property and assets have been distriburights and interests. | ated among its members in accordance with their respective |
| 7. CHECK ONE: There are no suits pending against the comp | any in any court. |
| -OR- | atisfaction of any judgment, order or decree which may be |
| Signatures of the members having the same percentage of | membership interests necessary to approve the dissolution: |
| Signature | Printed Name |
| MAOn | Matthew Overniese |
| | |
| | |
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