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| (Requestor's Name) | | | | |
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| (City/State/Zip/Phone #) | | | | |
| PICK-UP WAIT MAIL | | | | |
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| (Business Entity Name) | | | | |
| (Submoss Sharp Hame) | | | | |
| | | | | |
| (Document Number) | | | | |
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| Certified Copies Certificates of Status | | | | |
| | | | | |
| Consideration to Filling Officer | | | | |
| Special Instructions to Filing Officer: | | | | |
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2008 JAN 31 PH 12: 52
SECRETARY OF STATE
SECRETARY OF STATE

T. CLINE

FEB - 1 2008

EXAMINER

COVER LETTER

| _ | of Corporations | | |
|----------------------|---|---|----------------------|
| SUBJECT: | ATI FUNDING | ELLC. | |
| SUBJECT: | | mited Liability Company) | |
| | | | |
| The enclosed Art | icles of Dissolution and fee(s) are subr | mitted for filing. | |
| Please return all | correspondence concerning this matter | to the following: | |
| | VINCEN | T DEFAUWES. | |
| | 4) | Name of Person) | |
| | ATI FUNDING O | LLC / BAC HOLDINGS LLC Firm/Company) | ? . |
| | (I | Firm/Company) | |
| | P.O. BOX | 4/6689 (Address) | |
| | | | |
| | MIAMI BEAK | CH, FL 33141-6689 | |
| | (City/ | (State and Zip Code) | 2 |
| For further infor | nation concerning this matter, please c | all: | 2000 JAN 31 PH 12: 5 |
| | | in it | TITLE PROPERTY. |
| VIN | CENT DEFAULES. | at (305) 328 8560 0 Area Code & Daytime Telephone Number | |
| | (Name of Person) | (Area Code & Dayunie Telephone Pumper) | PH I |
| Enclosed is a check | c for the following amount: | , or | 7AT 7:5 |
| \$25.00 Filing Fe | 30.00 Filing Fee & Certificate of Status | \$55.00 Filing Fee & \$60.00 Filing Certified Copy (additional copy is enclosed) Second Filing Certificate of State Certified Copy (additional copy (additional copy (additional copy copy)) | Fee, Natus & |
| | | | |
| | MAILING ADDRESS: | STREET/COURIER ADDRE | SS: |
| Registration Section | | Registration Section Division of Corporations | |
| | Division of Corporations P.O. Box 6327 | Clifton Building | |
| | Tallahassee, FL 32314 | 2661 Executive Center Circle | |

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

| 1. The name of a limited liability company is | |
|---|--|
| ATI FUNDING LL | <u>C. </u> |
| 2. The Articles of Organization were filed on TUIV | 12 H 2007 and assigned document number |
| _ | and assigned document number |
| L07000072135 | |
| 3. The date the dissolution was approved: | ?9-08 |
| 4. A description of occurrence that resulted in the limite 608.441, Florida Statutes, (copy 608.441 on back cov | |
| | |
| DE OPRANIZATION OR OPERATION | NTS SPECIFIED IN THE ARTICLES |
| OF UNGINETATION OF DICTORY | A MODEL HERVI |
| | |
| | |
| 5. CHECK ONE: | |
| | nited liability company have been paid or discharged. |
| OR- Adequate provision has been made for the de | ebts, obligations and liabilities pursuant to s. 608.4421. |
| 6 All remaining property and assets have been distribut | ed among its members in accordance with their respective |
| rights and interests. | 2008 TALL |
| 7. CHECK ONE: | ECC B II |
| There are no suits pending against the compa | |
| OR- | tisfaction of any judgment, order or decree which may be |
| entered against it in any pending suit. | TO THE PARTY |
| | STA- |
| gnatures of the members having the same percentage of n | nembership interests necessary to approve the dissolution: |
| | |
| Signature | Printed Name |
| | A. A.—A. (1.0 m) |
| | VINCENT DEFAUWES |
| | DEFAUNET ENTERPRISES LL |
| | |
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