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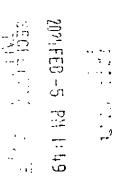
(Requestor's Name)
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PICK-UP WAIT MAIL
(Cyainaga Entity Nama)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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COVER LETTER

	0012			
TO:	Registration Section		•	
	Division of Corporations			
SHRIF	Alliance Management, LLC			_
GODOL	(Name of Limit	ed Liability Compa	ny)	
The enc	closed Articles of Dissolution and fee(s) are submit	ted for filing.		
Please r	return all correspondence concerning this matter to	the following:		
	Richard H. Knoll			
	(Nai	me of Person)		
	Alliance Management, LLC			
	(Fir	m/Company)		792
	5618 SE CR 763			OFFER OFFER
		(Address)		1
	Arcadia, FL 34266			
	(City/St	ate and Zip Code)		 • •
For furt	ther information concerning this matter, please call	l:		:: 9
	Barbara G. Knoll	239 at (784-2096	
	(Name of Person)		ode & Daytime Telepho	ne Number)
Enclose	d is a check for the following amount:			
	S25.00 Filing Fee and Certificate of Dissolution		3 Fee, Certificate of Diss Copy (additional copy is	
Mailing Address:		Street Addres		
Registration Section Division of Corporations		Registration Section Division of Corporations		
	P.O. Box 6327		of Tallahassee	OIA
	Tallahassee, FL 32314	Tallahassee	nroe Street, Suite , FL 32303	010

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

. . . .

۱.	The name of a limited liabili Alliance Management, LLC	ty company is		- <u>-</u> -	
2.	The Articles of Organization	were filed on April 14,	2008	and assigned	
	document number L0800003	7303	_		
	The delayed effective date the (effective of Note: If the date inserted in the listed as the document's effect	is block does not meet the	e applicable statutory filing	document is received	
•	A description of occurrence to 605.0707, Florida Statutes, (c. Sold business.	hat resulted in the limit opy 605.0707 on back	ed liability company's d cover letter).	issolution pursuar	nt to sectior
					207
					<u>:</u>
					<u>==</u>
	If there are no members, enter activities and affairs:	er the name and address Barbara G, Knoll	of the person appointed	to wind up the co	ompany`s
					·
). ib	Signature of an authorized poor to wind up the company's	erson or if there are no is activities and affairs:	nembers, the signature o	if the person appo	inted and li
X	5 mtmc & 7	troll	Barbara G. Knoll	d Name	

FILING FEE: \$25.00