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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) | | | | | |
| (Document Number) | | | | | |
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| Certified Copies Certificates of Status | | | | | |
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| Special Instructions to Filing Officer: | | | | | |
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Office Use Only



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SECRETARY OF STATE

B.MAY 12 PM 12:

COVER LETTER

| | Division of Corporations | |
|--------|--|---|
| | SUBJECT: CAROL AQUILANTE, LLC | |
| | (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: | |
| | CAROL AQUILANTE | |
| | (Name of Person) | 2 |
| | CAROL AQUILANTE, LLC | 超 |
| | (Firm/Company) | 112 新經 |
| | 14120 BARLINGTON STREET | OB MAY 12 PM 12: 54 SECRETARY OF STATE TALLAHASSEE FLOAID |
| | (Address) | F.ST P.ST |
| | SPRING HILL, FL 34609 | |
| | (City/State and Zip Code) | |
| | For further information concerning this matter, please call: | |
| | CAROL AQUILANTE at (352) 428-8382 | |
| | (Name of Person) (Area Code & Daytime Telephone Number | er) |
| | Enclosed is a check for the following amount: | |
| | \$25.00 Filing Fee \$\ \text{Certificate of Status} \] S25.00 Filing Fee \$\ \text{Certified Copy} \\ \text{(additional copy is enclosed)} \] Certified Copy \\ \text{(additional copy is enclosed)} \] Certified Copy \\ \text{(additional copy is enclosed)} \] | itatus & |
| , | MAILING ADDRESS: STREET/COURIER ADDR | ESS: |
| | Registration Section Registration Section Division of Corporations Division of Corporations | |
| | P.O. Box 6327 Clifton Building | |
| h ju v | Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301 | |
| 7 | Tananassee, 1 L 32301 | |

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ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

| 2. The Articles of Organization were filed on L04000051574 | Y 12, 2004 | and assigned | document numbe |
|---|--|------------------------|----------------------|
| 3. The date the dissolution was approved: 05-05-2 | 2008 | · | |
| 4. A description of occurrence that resulted in the lim 608.441, Florida Statutes, (copy 608.441 on back of NO LONGER IN THE MORTGAGE | nited liability compar cover letter). | | ant to section 8 HA |
| | | | HASS |
| | | | HO: |
| | | • | FLOR |
| 5. CHECK ONE: | • | | S _m |
| ✓ All debts, obligations and liabilities of the OR-Adequate provision has been made for the | · | • • | _ |
| 6. All remaining property and assets have been distributing rights and interests. | buted among its men | nbers in accordance w | ith their respective |
| 7. CHECK ONE: | | | |
| There are no suits pending against the com-OR-Adequate provision has been made for the entered against it in any pending suit. | | udgment, order or dec | ree which may be |
| gnatures of the members having the same percentage o | of membership intere | sts necessary to appro | ve the dissolution |
| Signature | | Printed Name | |
| arol a aquilente | CAR | OL A. AQU | LANTE |
| | - 10 10 - 11 | | |
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