

Elorida Department of State Division of Corporations P.-O. Box 6327 Tallahassee, Fl 32314

> 200003631442--3 -02/02/01--01122--001 *****25.00 ******25.00

Attached I am sending a completed dissolution for a Limited Liability Company. I have enclosed the \$25.00 filing fee. Please send the letter of acknowledgement to the following address:

4600 Big Tree Way #3A, Greensboro, NC 27409

Thank you,

Alan DeLeo

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FILED

OFEB-2 PM.1: 05

SECRETARY OF STANDARY
TATLAHASSEE FLORINA

ARTICLES OF DISSOLUTION FOR A FLORIDA LIMITED LIABILITY COMPANY

1. The name of the limited liability company is	is ISTDESIGN, LC	
2. The effective date of the limited liability co		_
3. A description of the occurrence that resulte section 608.441, Florida Statutes, (cop		
the Company Never obtained or debts inc		No Income
 4. CHECK ONE: All debts, obligations and liabilities of the -OR- Adequate provision has been made for the 5. All remaining property and assets have been respective rights and interests. 	debts, obligations and liabilities purs	uant to s. 608.4421.
 6. CHECK ONE: There are no suits pending against the com-OR- Adequate provision has been made for the be entered against it in any pending suit. 		r decree which may
Signatures of the members having the same the dissolution:	percentage of membership interests	necessary to approve
Signature	Typed or Printed name Alan Deleo	FILED OIFEB-2 PM I: SLOKEIART OF SIDE
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