L00000(3015

Scott Andrews UC (Requestor's Name) P, 0. BOX 241988 (Address) MIM DNIS TN 38 124-1988 (Address)	900017181979
(City/State/Zip/Phone #)	05/02/0301035001 **25.00
(Business Entity Name) (Document Number)	MJH
Certified Copies Certificates of Status	
Special Instructions to Filing Officer: 5/2 William Officer:	O3 MAY - SECRETA TALLAHA
1 12010	SSEE P III

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ARTICLES OF DISSOLUTION FOR A FLORIDA LIMITED LIABILITY COMPANY

3. A description of the occurrence that resulted in the limited liability company's dissolution pursuant to Osection 608.441, Florida Statutes, (copy of 608.441 on back of cover letter). The members of the LLC agreed to dissolve the company on December 31, 2002. All assets were distributed according to the operating agreement and all liabilities were paid in full.		
		nited liability company have been paid or discharged.
		listributed among its members in accordance with their
ny in any court. isfaction of any judgment, order or decree, which may		
entage of membership interests necessary to approve the		
Typed or Printed name David S. Andrews, Chief Manager City Enterprises, LLC E.H. Scott AND SEE FLORE SECURIARY OF STATES		
1		

Filing Fee: \$25.00