



## AUTOMOTIVE AND TRUCK ACCESSORIES INC.

Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

April 25, 2002

4/29  
LDT-8090  
diss

400005368894--7  
-04/29/02--01073--013  
\*\*\*\*\*30.00 \*\*\*\*\*30.00

To Whom It May Concern:

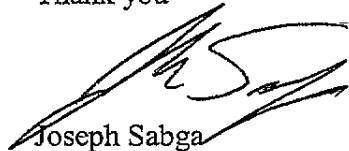
This letter is to confirm the dissolution of Ideal Automotive & Truck Accessories LLC. Please see the attached Articles of Dissolution. Enclosed is a check for \$30 for the Filing Fee and a Certificate of Status.

Please send a confirmation to:

Joseph Sabga  
10720 NW 66<sup>th</sup> ST, Apt 411  
Miami, FL 33178

Please call me at (954) 493-9800 with any questions.

Thank you

  
Joseph Sabga

CIRCL

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02 APR 29 PM 5:06  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

## CORPORATE OFFICES

EAST COAST  
6560 POWERLINE ROAD • FORT LAUDERDALE, FL 33309  
(800) 621-6464 • (954) 493-9800 • (954) 493-8760 FAX

WEST COAST  
8507 ADAMO DRIVE • TAMPA, FL 33619  
(888) 711-6655 • (813) 621-6655 • (813) 621-3912 FAX

**ARTICLES OF DISSOLUTION  
FOR  
A FLORIDA LIMITED LIABILITY COMPANY**

1. The name of the limited liability company is IDEAL AUTOMOTIVE & TRUCK  
ACCESSORIES LLC

2. The effective date of the limited liability company's dissolution is 4/25/02

3. A description of the occurrence that resulted in the limited liability company's dissolution pursuant to  
Section 608.441, Florida Statutes, (copy of 608.441 on back of cover letter).

Written consent of all members

4. **CHECK ONE:**

☒ All debts, obligations and liabilities of the limited liability company have been paid or discharged.

-OR-

☐ Adequate provision has been made for the debts, obligations and liabilities pursuant to s. 608.4421.

5. All remaining property and assets have been distributed among its members in accordance with their  
respective rights and interests.

6. **CHECK ONE:**

☒ There are no suits pending against the company in any court.

-OR-

☐ Adequate provision has been made for the satisfaction of any judgment, order or decree, which may  
be entered against it in any pending suit.

Signatures of the members having the same percentage of membership interests necessary to approve the  
dissolution:

Signature

[Signature]  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Typed or Printed name

Joseph Sabga  
\_\_\_\_\_  
\_\_\_\_\_  
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\_\_\_\_\_

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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Filing Fee: \$25.00