LD/DOS 10948

| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
| |
| |
| |

Office Use Only



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08 APR 30 PM 5: 14
SECRETARY OF STATE

D. BRUCE
MAY 0 1 2008

EXAMINER

COVER LETTER

| TO: Registration Section Division of Corporations | | |
|--|-----------|------|
| SUBJECT: | | |
| | | |
| The enclosed Articles of Dissolution and fee(s) are submitted for filing. | | |
| Please return all correspondence concerning this matter to the following: | | |
| Penny Anderson (Name of Person) | | |
| (Name of Person) | | |
| (Firm/Company) | | |
| Creenacres, FC 33415 | 80 | |
| (Address) | 08 APR 30 | |
| Greenacres, FC 33415 | ~ვე | 7122 |
| (City/State and Zip Code) | | |
| For further information concerning this matter, please call: | 5: Hd | |
| (Name of Person) at (Area Code & Daytime Telephone Number) | = | |
| (Name of Person) (Area Code & Daytime Telephone Number) | _ | |
| Enclosed is a check for the following amount: | | |
| 25.00 Filing Fee 30.00 Filing Fee & \$55.00 Filing Fee & \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) | | |

MAILING ADDRESS:

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

Endingle Property

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

| 1. The name of a limited liability company is YME 1945 IN VESTULE | /8 | | | | |
|---|--|----------------------|---|-------------------|----------|
| 2. The Articles of Organization were filed on | aly 5, 2001 | and assign | ed docume | ent nur | nber |
| 4. A description of occurrence that resulted in the lim | itad liability samman | | | _4: | |
| 608.441, Florida Statutes, (copy 608.441 on back | cover letter). | s dissolution pur | suant to se | | .9 |
| Loss of nembers | | | FE | 08 AP | confina |
| | | | AH | PR | COMME |
| | | | - SS = - | - 23 - | - |
| | ·-···································· | | M C | PH | Ť |
| | | | | <u>ः</u> === | - 10 m |
| 5. CHECK ONE: | | | 유달 | | L |
| All debts, obligations and liabilities of the | limited liability comp | any have been pai | d or discha | arged. | |
| OR- Adequate provision has been made for the | debts, obligations and | l liabilities nursua | nt to s. 608 | .4421. | |
| All remaining property and assets have been distributed rights and interests. | | | | | |
| 7. CHECK ONE: | | | | | |
| There are no suits pending against the com- | nany in any court | | | | |
| OR- Adequate provision has been made for the entered against it in any pending suit. | • | igment, order or d | ecree whic | h may | be |
| signatures of the members having the same percentage o | f membership interest | s necessary to appr | rove the di | ssoluti | on: |
| Signature | 1 | Printed Nan | . 1 | \ | |
| Henry Januaran | | MAY L. A | nde | <u> </u> | 1 |
| | | | | | |
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FILING FEE: \$25.00