LOCOCO 18260 - 827 Arden Lugh Dr. - Orlando, FL 32828

Office Use Only

Examiner's Initials

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1.	(Corporation Name)	(Document #)
2	(Corporation Name)	(Document #) 8000868781683 -08/02/0201055005
3.	(Corporation Name)	******25.00 ******25.00 (Document#)
4.	(Corporation Name) Walk in Pick up time Mail out Will wait	(Document #) Certified Copy : The Photocopy Certificate of Status :
<u>1</u>	NEW FILINGS Profit	AMENDMENTS Amendment
	Not for Profit Limited Liability Domestication Other	Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger
<u>C</u>	OTHER FILINGS	REGISTRATION/QUALIFICATION
	Annual Report Fictitious Name	Foreign Limited Partnership Reinstatement Trademark Other

CR2E031(7/97)

ARTICLES OF DISSOLUTION FOR A FLORIDA LIMITED LIABILITY COMPANY

1. The name of the limited liability company is	
2. The effective date of the limited liability company's dissolution is	
 4. CHECK ONE: All debts, obligations and liabilities of the limited liability company have been paid or dischargedOR- 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 courtOROR 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: 	FILED
Signature Typed or Printed name Aly 50 N Dri 665	

Filing Fee: \$25.00