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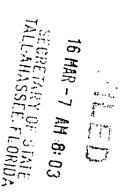
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Office Use Only



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COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT:

DAYTONA DIGITAL LLC

(Name of Limited Liability Company)

The enclosed Articles of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Timothy L. Johns					
(Name of Person) aytona Digital (Firm/Company) 63 Branch Drive (Address)					
Daytona Digital					
(Firm/Company)					
663 Branch Drive					
(Address)					
Port Orange, FL 32127					
(City/State and Zin Code)					

For further information concerning this matter, please call:

Timothy Johns
(Name of Person)

(Name of Person)

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

■ \$25.00 Filing Fee and Certificate of Dissolution

□ \$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

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

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 DAYTONA DIGITAL LLC				
2.	The Articles of Organizati	on were filed on 11/30/200	01	and assigned	
	document number L010000)20987	_		
3.	The delayed effective date the dissolution if not effective on the date of filing: (effective date cannot be prior to or more than 90 days later than date document is received for filing) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not listed as the document's effective date on the Department of State's records.				
4.	A description of occurrence 605.0707, Florida Statutes,	e that resulted in the limit (copy 605.0707 on back	ted liability company's cover letter).	dissolution pursuant to section	
	Due to a downturn in business	s, and a failure to make a pro	ofit, this business is now c	losed.	
		<u> </u>			
5.	If there are no members, enter the name and address of the person appointed to wind up the company's				
	activities and affairs:	Timothy L. Johns		50 6	
		663 Branch Drive		IARY IARY	
		Port Orange, FL 32127		EFF.	
				: 03	
6. lis	Signature of an authorized sted above to wind up the co	person or if there are no impany's activities and af	members, the signature fairs:	of the person appointed and	
	_				
	151	<i>/</i> ,	Timothy L. Johns		
	Signature			ed Name	

FILING FEE: \$25.00