T0500000190

	(Requ	estor's Na	me)			
	(Addre	ess)				
	(Addre	ess)				
	(City)S	itate/Zip/P	hana #			
	(City/e	nate/Zipir	none #j			
	PICK-UP	☐ WAΠ		MAIL		
(Business Entity Name)						
	(Docu	ment Num	ber)			
er	tified Copies	Certific	ates of	Status		
Sţ	pecial Instructions to Fili	ng Officer:	************			
	Name Avallability					
	Document					
	t_xam:ner	DOC Different less				
	Updater	DINGE USE	Only			
	Updater Voniver	(A.Q.				
	Asknowledgement	DCC				
	W. P. Verifver	DCC				



500029504705

03/02/04--01023--008 **25.00

04 MAR -1 PM 3: 17

TRANSMITTAL LETTER

February 7, 2004

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

SUBJECT: Sheri L Fermanis, LLC – Articles of Dissolution Document # L02000000720

SECRETARY OF STATE DIVISION OF CONTRACTIONS

From:	Sheri L. Fermanis	. 7
	2705 Mai-Hand (Mossing Way Apt. 510)
	Orlando FL 32810-7139	•
	407-538-5940	•
	Daytime Telephone Number	-

ARTICLES OF DISSOLUTION FOR A FLORIDA LIMITED LIABILITY COMPANY

1. The name of the limited liability company is _	Sheri L. Fermanis, LLC	
 The effective date of the limited liability comp A description of the occurrence that resulted 0section 608.441, Florida Statutes, (copy of 60) 	in the limited liability company's d	lissolution pursuant to
We have ceased doing business.		£. **
 4. CHECK ONE: All debts, obligations and liabilities of the lin-OR- Adequate provision has been made for the de 5. All remaining property and assets have been 	ebts, obligations and liabilities pursu	uant to s. 608.4421.
respective rights and interests. 6. CHECK ONE: There are no suits pending against the compa -OR- Adequate provision has been made for the sat be entered against it in any pending suit.	•	STATE STATE OF THE
Signatures of the members having the same perodissolution:	centage of membership interests nee	cessary to approve the
Signature & Sucus	Typed or Printed name Sheri L Fermanis	
		

Filing Fee: \$25.00