Florida Department of State

Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H05000124634 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : COURT ACCESS CENTERS OF AMERICA

Account Number : 075350000541

Phone

: (813)875-1333

Fax Number

: (813)875-2703

LIMITED LIABILITY DISSOLUTION

INNOVATIVE TILE INSTALLATION, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

Flactropic Filing Menu.

Corporate Fling

Rublic Accord Help

MAY 17 2005 10:48AN HP LASERJET 3200

w. 2

Audit # H05000124634

ARTICLES OF DISSOLUTION FOR A FLORIDA LIMITED LIABILITY COMPANY

1. The name of the limited liability company is		
INNOVATIVE TILE INSTALLATION, LLC		
2. The date the dissolution was approved; 5/17/05		
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).		
We no longer need the LLC and have decided to form a	corporation.	
	A Section 1	
	442	
	SEE	
 CHECK ONE: All debts, obligations and liabilities of the limited OR- 	I liability company have been paid or discharged.	
 Adequate provision has been made for the debts, 	obligations and limbilities pursuant to s. 608.442	
All remaining property and assets have been distr respective rights and interests.	ibuted among its members in accordance with their	
6. CHECK ONE: 7. There are no suits pending against the company in OR-	a any court.	
 Adequate provision has been made for the antisfact be entered against it in any pending suit. 	ction of any judgment, order or decree which may	
Signatures of the members having the same percenture dissolution:	tage of membership interests necessary to approve	
Signature	Typed or Printed name	
Suy Med	JEREMY C. MARTINEZ	
Heisten Martiner	KRISTEN R. MARTINEZ	
de la constantina della consta	SHANNON T. MARTINEZ	

Filing Fee: \$25.00

Audit # H05000124634