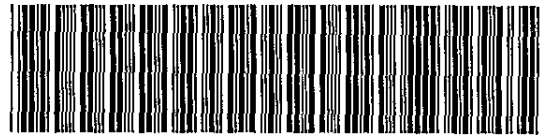


LO3000000509

03 JUL 15 PM 1:00  
CLERK OF STATE  
TALLAHASSEE, FLORIDA



500021420605

~~07/16/03--01004--001~~ \*\*25.00

(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:

AL

Office Use Only

Skyline Renovations, LLC.  
Darin Wolfe  
421 SE 3<sup>rd</sup> Terrace  
Dania Beach, Fl 33004  
954-921-4828

FILED  
03 JUL 15 PM 1:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Please process the dissolution of Skyline Renovations, LLC. A money order for twenty-five dollars is included with the forms.

**ARTICLES OF DISSOLUTION  
FOR  
A FLORIDA LIMITED LIABILITY COMPANY**

FILED

03 JUL 15 PM 1:00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1. The name of the limited liability company is Skyline Renovations LLC

2. The effective date of the limited liability company's dissolution is 7/7/03

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).

Both owners have mutually agreed to  
discontinue business and are giving written  
consent to terminate the existence of Skyline  
Renovations LLC.

4. **CHECK ONE:**

- ☒ All debts, obligations and liabilities of the limited liability company have been paid or discharged.  
-OR-  
☐ 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.

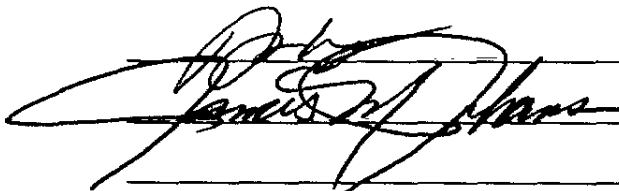
6. **CHECK ONE:**

- ☒ There are no suits pending against the company in any court.  
-OR-  
☐ 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:

Signature

Typed or Printed name



Darin Wolfe  
JAMES M. HANSEN

Filing Fee: \$25.00