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(Business Entity Name)

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01/21/04

31

# PERFORMANCE & LEADERSHIP INSTITUTE

James Horan  
1233 Vestavia Circle  
Melbourne, FL 32940

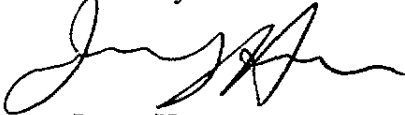
1/10/04

Dear Sirs,

Please accept this as a cover letter accompanying the dissolution forms for Performance & Leadership Institute, LLC.

As per instructions, my telephone number is 321-751-7179 and my return address is as noted above.

Sincerely



James Horan

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

1. The name of the limited liability company is \_\_\_\_\_

Performance + Leadership Institute, LLC

2. The effective date of the limited liability company's dissolution is 1/10/04

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).

LACK OF BUSINESS ACTIVITY IN AN AMOUNT THAT  
WOULD SUSTAIN THE BUSINESS. PURSUANT 608.441  
NUMBER 1.(c) WHEREBY ALL MEMBERS CONSENT TO  
DISSOLUTION

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:**

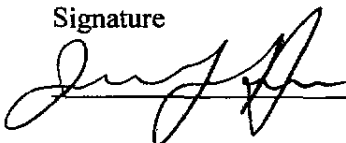
☒ There are no suits pending against the company in any court.

-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

JAMES L. HORAN  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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