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COVER LETTER

SUBJECT: Airwash, LLC (Name of Limited Liability Company) The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Michael A. Falke (Name of Person) (Firm/Company) IDO! Brickell Ray Drive # 2202 Address) Migmi, FL 33181 (City/State and Zip Code) For further information concerning this matter, please call: Michael A. Falke (Name of Person) (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: S25.00 Filing Fee S30.00 Filing Fee \$ Certificate of Status \$ Certified Copy (additional copy is enclosed)	TO: Registration Section Division of Corporations
Please return all correspondence concerning this matter to the following: Michael A. Falke (Name of Person)	SUBJECT: Air Wash, LLC (Name of Limited Liability Company)
Michael A. Falke (Name of Person) (Firm/Company) DO Brickell Bay Drive # 2202 Address) Michael A. Falke (City/State and Zip Code) For further information concerning this matter, please call: Michael A. Falke (Name of Person) A 255.00 Filing Fee Certificate of Status Certificate of Status & Certificate Copy (additional copy is enclosed)	The enclosed Articles of Amendment and fee(s) are submitted for filing.
(Firm/Company) DO Brickell Ray Drive # 2202 File	Please return all correspondence concerning this matter to the following:
DO Brickell Bay Drive # 2202 Fig. 87 Fig. 87 Fig. 87 Fig. 88 Fig. 89 Fig. 80 Fig. 89 Fig. 80 Fig. 89 Fig. 80 Fig. 89 Fig. 80 F	Michael A. Falke (Name of Person)
For further information concerning this matter, please call: Michael A Falke at (305) 799-4800 (Name of Person) (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: \$55.00 Filing Fee &	1001 Brickell Bay Drive # 2202 Fin T
For further information concerning this matter, please call: Michael A Falke at (305) 799-4800 (Name of Person) (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: \$55.00 Filing Fee &	Miami, FL 33131 (City/State and Zip Code)
(Name of Person) (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: \$25.00 Filing Fee \$30.00 Filing Fee & Status \$55.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	For further information concerning this matter, please call:
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Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy	<u> </u>
	Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy

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 <u>AITWASH</u> , <u>LL</u> C	
The Articles of Organization were filed on	4-22-03 and assigned document number
3. The date the dissolution was approved: 12	2-31-05. nited liability company's dissolution pursuant to section
608.441, Florida Statutes, (copy 608.441 on back	all of the members
77OR-	e limited liability company have been paid or discharged.
 6. All remaining property and assets have been distrirights and interests. 7. CHECK ONE: 	buted among its members in accordance with their respective
There are no suits pending against the con-OR-Adequate provision has been made for the entered against it in any pending suit.	e satisfaction of any judgment, order or decree thich may be
1/2	of membership interests necessary to approve the dissolution:
Stenature M. M	Printed Name Michael A. Falke
- Kall	Kenneth Falke
MI a Report 1t.	Pierre Le Marie Ducy Capital, LLC

FILING FEE: \$25.00