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2005 SEP -6 PM 2: 25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C03-17174

TRANSMITTAL LETTER

TO: Registration Section
         Division of Corporations

SUBJECT: <u>EPHESUS FASHION DESIGN, LC</u>
<div align="center">(Name of Limited Liability Company)</div>

The enclosed Articles of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

<div align="center">

<u>Seda Kulatti</u>
(Name of Person)

<u>EPHESUS FASHION DESIGN, LC</u>
(Firm/Company)

<u>6964 Brescia Way</u>
(Address)

<u>Orlando, FL 32819</u>
(City/State and Zip Code)

</div>

For further information concerning this matter, please call:

<u>Seda Kulatti</u> at (<u>407</u>) <u>928 - 8216</u>
(Name of Person)   (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ $25.00 Filing Fee   ☑ $30.00 Filing Fee &   ☐ $55.00 Filing Fee &   ☐ $60.00 Filing Fee &
                         Certificate of Status   Certified Copy   Certificate of Status &
                                                     (additional copy is enclosed)   Certified Copy
                                                                                (additional copy is enclosed)

STREET ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
409 E. Gaines Street	P.O. Box 6327
Tallahassee, Florida 32399	Tallahassee, Florida 32314

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: EPHESUS FASHION DESIGN, LC

(Name of Limited Liability Company)

The enclosed Articles of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Seda Kulatti

(Name of Person)

EPHESUS FASHION DESIGN, LC

(Firm/Company)

3956 Town Center Blvd.   214

(Address)

Orlando, FL 32837

(City/State and Zip Code)

For further information concerning this matter, please call:

Seda Kulatti   **at (** 407 **)** 928 - 8216

(Name of Person)   (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ $25.00 Filing Fee   ☑ $30.00 Filing Fee &   ☐ $55.00 Filing Fee &   ☐ $60.00 Filing Fee
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                                                                            (additional copy is enclosed)

STREET ADDRESS: **MAILING ADDRESS:**
Registration Section   Registration Section
Division of Corporations   Division of Corporations
409 E. Gaines Street   P.O. Box 6327
Tallahassee, Florida 32399   Tallahassee, Florida 32314

To Whom It May Concern:

Yesterday I sent a request of dissolution of EPHESUS FASHION DESIGN, LC. I believe I send a copy of the signature page instead the original along with a check for $30.00.

I am enclosing the original filing a long with a copy the check I sent. Please process my request of dissolution and call me, and send a certificate of status. If you need additional information, please contact me.

Thank you,

ARTICLES OF DISSOLUTION
FOR
A FLORIDA LIMITED LIABILITY COMPANY

1. The name of the limited liability company is

EPHESUS FASHION DESIGN, LC

2. The date the dissolution was approved: August 29, 2005

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).

Resignation of the only member. There are no members left.

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
X

Typed or Printed name
Seda Kulatti

Filing Fee: $25.00