## L0300025225

(Re	equestor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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		C11/8/1



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## TRANSMITTAL LETTER

**TO:** Amendment Section

Tallahassee, Florida 32314

Division of Corporations
SUBJECT: Articles of Dissolution
DOCUMENT NUMBER: L030000 25225
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Name of Person)
(Name of Person)
Arnel Boca LLC (Name of Firm/Company)  5220 Whisper Drive (Address)  (Address)
(Name of Firm/Company)  As 24
5220 Whisper Drive Es 3
(Address)
Coral Springs FL 33067 City/State/and Zip Code)
For further information concerning this matter, please call:
Tim Arnel at (954) 325-4377 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$35 Filing Fee \$\times \text{\$43.75 Filing Fee & Certificate of Status}\$\$ Certificate of Status & Certified Copy (Additional copy is enclosed) \$\$ (Additional copy is enclosed)\$\$\$ (Additional copy is enclosed)\$\$\$}\$
MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines Street

Tallahassee, Florida 32399



## FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

April 29, 2004

TIM ARNEL ARNEL BOCA LLC 5220 WHISPER DRIVE CORAL SPRINGS, FL 33067

SUBJECT: ARNEL BOCA LLC Ref. Number: L03000025225

We have received your document for ARNEL BOCA LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6097.

Marsha Thomas Document Specialist

Letter Number: 504A000290

livision of Cornerations - P.O. BOX 6327 -Tallahassee, Florida 32314

## ARTICLES OF DISSOLUTION FOR A FLORIDA LIMITED LIABILITY COMPANY

1. The name of the limited liability company is Arrel Boca LLC	
2. The effective date of the limited liability company's dissolution is 4/21/04  3. A description of the occurrence that resulted in the limited liability company's dissolution pursuan Osection 608.441, Florida Statutes, (copy of 608.441 on back of cover letter).  There are No members.	t to
4. CHECK ONE: All debts, obligations and liabilities of the limited liability company have been paid or disc parged. 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 the 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 made entered against it in any pending suit.	y
Signatures of the members having the same percentage of membership interests necessary to approve dissolution:  Signature  Typed or Printed name  Tim Armel	the

Filing Fee: \$25.00