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04/28/05--01059--003 \*\*30.00



## TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: (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:

BETH JUNCAL

(Name of Person)

AVALON CAPITAL ORDUP, INC.

(Firm/Company)

P. D. BOX 2409

(Address)

LA JOHA CA 92038

(City/State and Zip Code)

For further information concerning this matter, please call:

(Name of Person)

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ S25.00 Filing Fee

\$30.00 Filing Fee & Certificate of Status ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) Sectificate of Status & Certificate of Status & Certified Copy (additional copy is enclosed)

STREET ADDRESS:

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 MAILING ADDRESS:

Registration Section Division of Corporations 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  PARTON TIMES, H.C.  2. The date the dissolution was approved: H24	05	<del></del> •
3. A description of the occurrence that resulted in the I section 608.441, Florida Statutes, (copy of 608.441 CONSENT OF		olution pursuant to
,		
<ul> <li>4. CHECK ONE:</li> <li>All debts, obligations and liabilities of the limited lia -OR-</li> <li>Adequate provision has been made for the debts, obl</li> <li>5. All remaining property and assets have been distributed respective rights and interests.</li> <li>6. CHECK ONE:</li> <li>There are no suits pending against the company in arrow-OR-</li> <li>Adequate provision has been made for the satisfaction be entered against it in any pending suit.</li> </ul>	igations and liabilities pursuant ted among its members in acco	to s. 608.4421.
Signatures of the members having the same percentage the dissolution:  Signature	Typed or Printed name	essary to approve