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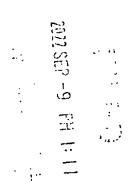
(Requestor's Name)					
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COVER LETTER

	gistration Section vision of Corporations				
end mar.	REAL ESTATE COMPANY OF AMERICA L	1.C			
SUBJECT:	(Name of Limited Liability Company)				
	ed Articles of Dissolution and fee(s) are submitted at all correspondence concerning this matter to the				
	SHEILA AMATE				
	(Name	of Person)			
	(Firm/C	Company)			
	11236 SW 28 STREET				
	(Address) MIAMI, FL 33165				
		and Zip Code)			
For further	information concerning this matter, please call;	20			
Ci	ARLOS A. SOMÓZA	305 857-6849 23 (Area Code & Daytime Telephone Number)	1.5°		
	(Name of Person)	(Area Code & Daytime Telephone Number)			
Enclosed is a	r check for the following amount:				
€ \$2	5.00 Filing Fee and Certificate of Dissolution	S\$5.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)	فو _ن کی ا		
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

 The name of a limited liability company i REAL ESTATE COMPANY OF AMERICA 		
2. The Articles of Organization were filed or	n 07/16/2003	and assigned
document number L03000026084		
5. The delayed effective date the dissolution (effective date cannot be particular). Note: If the date inserted in this block does this block does the document's effective date on the	not meet the applicable statute	ory filing requirements, this date will not be
1. A description of occurrence that resulted 605.0707, Florida Statutes, (copy 605.070	in the limited liability comp 7 on back cover letter).	pany's dissolution pursuant to section
The dissolution of the Company was authorize	ed by the written consent of the	e sole member of the Company.
 		
5. If there are no members, enter the name a	nd address of the person ap	pointed to wind up the companys
activities and affairs:		-22 S
		. TO .
		
		<u> </u>
5. Signature of an authorized person or if the above to wind up the company's activities an	ere are no members, the sign and affairs:	nature of the person appointed and liste
Shoile amoto	Sheila Amate	
Signature		Printed Name

FILING FEE: \$25.00