

L03000042280

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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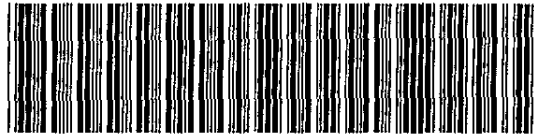
(Business Entity Name)

(Document Number)

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SECURITY DIVISION  
TALLAHASSEE, FLORIDA

2005 FEB 16 PM 1:44

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**TRANSMITTAL LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Twenty to five lve (20:2:12) LLC  
(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:

NINA SEGURA  
(Name of Person)

Twenty to five lve (20:2:12) LLC  
(Firm/Company)

4092 SPINA TREE  
(Address)

SUNRISE, FL 33351  
(City/State and Zip Code)

For further information concerning this matter, please call:

Nina Segura at 954 260-3888  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- \$25.00 Filing Fee
- \$30.00 Filing Fee & Certificate of Status
- \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

SECRET  
TALLAHASSEE, FLORIDA  
2005 FEB 16 PM 1:44

**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