

L03000055139

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

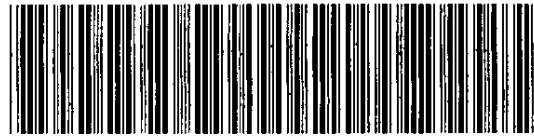
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

A. LUNT
JUN 09 2008
EXAMINER

Office Use Only



100130892051

06/06/08--01021--007 **30.00

2008 JUN -6 P 4: 10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Curtis Scura Painting
(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:

Curtis Scura
(Name of Person)

(Firm/Company)

1215 Jayhil Drive
(Address)

Minneola, Florida 34715
(City/State and Zip Code)

2000 JUN -6 P 4: 10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

For further information concerning this matter, please call:

Barbara Scura at (352) 267-0340
(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)

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is Curtis Scura Painting

2. The Articles of Organization were filed on _____ and assigned document number LD3000055139

3. The date the dissolution was approved: 5/15/08

4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 608.441, Florida Statutes, (copy 608.441 on back cover letter).
The owner of the company, Curtis Scura, became ill and disabled and therefore can no longer keep his business open.

5. 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.

6. All remaining property and assets have been distributed among its members in accordance with their respective rights and interests.

7. 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.

FILED
JUN -6 P 8:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Signatures of the members having the same percentage of membership interests necessary to approve the dissolution:

Signature
Curtis W. Scura
Barbara Scura

Printed Name
Curtis W. Scura
Barbara A. Scura

