L04000013285

(R	Requestor's Name)	
(A	address)	
(A	ddress)	
(C	City/State/Zip/Phone #)	
PICK-UP	WAIT MAIL	
	Business Entity Name)	
(D	Ocument Number)	
Certified Copies	Certificates of Status	
Special Instructions to Filing Officer:		
	Office Use Only	



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COVER LETTER

	ration Section on of Corporations		
SUBJECT: _	BROKA HANDY /	MAN LLC mited Liability Company)	
	articles of Amendment and fec(s) are sub	_	
	THEOFILOS V	-	
	BROKA HAND		
at a second	749 SEMINO	LE BLUD (Address)	5. 0
	TARPON SPRIN	State and Zip Code)	S JAN 13
For further info	rmation concerning this matter, please c HEOFILOS RIGAS (Name of Person)		3999 SA
Enclosed is a cher	rick for the following amount: Fee \$\int \\$30.00 \text{ Filing Fee & Certificate of Status}	Certified Copy Cert (additional copy is enclosed) Cert	\$60.00 Filing Fee, tificate of Status & tified Copy ditional copy is enclosed)
	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327	STREET/COURIER Registration Section Division of Corporation Clifton Building	

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

=	The name of a limited liability company is BROKA HANDY MAN	16
	2. The Articles of Organization were filed onF	eb, 10, 2004 and assigned document number
	 3. The date the dissolution was approved:	imited liability company's dissolution pursuant to section k cover letter).
	OR- Adequate provision has been made for to 6. All remaining property and assets have been distrights and interests. 7. CHECK ONE: There are no suits pending against the coor-	he limited liability company have been paid or discharged; he debts, obligations and liabilities pursuant to s. 608.44215 tributed among its members in accordance with their respective ompany in any court. The satisfaction of any judgment, order or decree which may be
-	Signature Signature	e of membership interests necessary to approve the dissolution: Printed Name THEOFILOS V, RIGAS
-	Landia C. Rigar	SANDRA C. RIGAS
_		