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(Requestor's Name)		
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(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
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(Document Number)		
Certified Copies Certificates of Status		
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2007 MAR 20 PH 1: 07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Safaney Dec (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:
Emma P. ConTrucci
(Name of Person) SAJAREX
4400 M. Player STASS
Har 20 HAR 20 HAR 20 LANGE REPORT OF THE PART OF THE P
(City/State and Zip Code)
(City/State and Zip Code) For further information concerning this matter, please call:
(Name of Person) (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount: \$25.00 Filing Fee \$ Certificate of Status \$55.00 Filing Fee \$ Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, 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	O	
2. The Articles of Organization were filed on 5/11/04 and assigned document number L0400035618		
 3. The date the dissolution was approved: 12-3 4. A description of occurrence that resulted in the limite 608.441, Florida Statutes, (copy 608.441 on back cov 		
Manimous Consert	g all members.	
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OR- Adequate provision has been made for the de 6. All remaining property and assets have been distribut rights and interests. 7. CHECK ONE: There are no suits pending against the comparation.	ed among its members in accordance with their respective only in any court.	
Signatures of the members having the same percentage of r	nembership interests necessary to approve the dissolution:	
Signature Annie Son tucció Phistrie fromest	Anthony Contrucci Emma Contrucci Christine Forcest	

FILING FEE: \$25.00