## L04 0000 40423

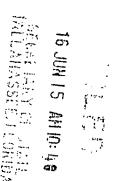
(Re	equestor's Name)				
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	_ Certificates	of Status			
Special Instructions to Filing Officer:					

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## **COVER LETTER**

TO:	TO: Registration Section Division of Corporations					
CUIDIE	J&J Real Ventures, LLC					
SUBJECT:(Name of Limited Liability Company)						
The end	closed Articles of Dissolution and fee(s) are submitt	ed for filing.				
Please	return all correspondence concerning this matter to t	the following:				
	Ronald G. Smith					
(Name of Person)						
Law Office of Ronald G. Smith						
	(Firm/Company)					
•	8170 Corporate Park Drive, Suite 302					
(Address)						
Cincinnati, Ohio 45242						
(City/State and Zip Code)						
For fur	ther information concerning this matter, please call:					
Ronald G. Smith		513 at (	241-8400			
(Name of Person)			(Area Code & Daytime Telephone Number)			
Enclose	ed is a check for the following amount:					
\$25.00 Filing Fee and Certificate of Dissolution		\$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)				
	MAILING ADDRESS:	STRI	EET/COURIER ADDRESS:			

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

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

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

The name of a limited lia     J&J Real Ventures, LLC	oility company is		
2. The Articles of Organizat	ion were filed on	an	d assigned
document number	040623		
(effect Note: If the date inserted i	e the dissolution if not effective date cannot be prior to or more to this block does not meet the appreciate date on the Department of	han 90 days later than date docu plicable statutory filing requi	ment is received for filing) rements, this date will not
4. A description of occurrer 605.0707, Florida Statutes Unanimous consent of all th	ce that resulted in the limited (copy 605.0707 on back core members.	liability company's dissolver letter).	ution pursuant to section
			<u> </u>
	40.41		15888 158888
•	enter the name and address of	the person appointed to w	vind up the company's
activities and affairs:			
6. Signature of an authorize listed above to wind up the o	d person or if there are no me company's activities and affai	mbers, the signature of the	person appointed and
x As		Shree Kulkarni	
Signature		Printed Na	me

**FILING FEE: \$25.00**