

L040W076290

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

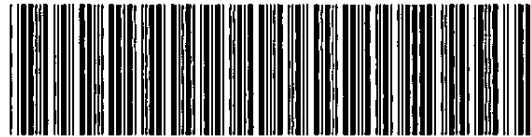
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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B. KOHR

JUL 31 2009

EXAMINER



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195
REFERENCE : 083263 7393609
AUTHORIZATION : *[Signature]*
COST LIMIT : \$ 25.00

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TALLAHASSEE, FLORIDA

ORDER DATE : July 30, 2009
ORDER TIME : 8:34 AM
ORDER NO. : 083263-005
CUSTOMER NO: 7393609

DOMESTIC FILINGS

NAME: SHS BLUE LAGOON, LLC

XX ARTICLES OF DISSOLUTION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- CERTIFIED COPY
- XX PLAIN STAMPED COPY
- CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight - EXT# 2956

EXAMINER'S INITIALS: _____

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is
SHS BLUE LAGOON, LLC

2. The Articles of Organization were filed on October 20, 2004 and assigned document number
L04000076290

3. The date the dissolution was approved: (*)

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 effective date of dissolution is July 10, 2009.

The company shall be deemed dissolved upon the filing of these Articles of Dissolution of
the company with the Florida Department of State.

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.

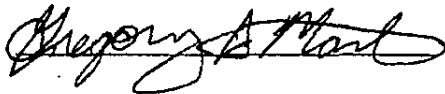
6. All remaining property and assets have been distributed among its members in accordance with their respective
rights and interests.

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.

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

Signature



Printed Name

Greg Martin, Authorized Person

FILING FEE: \$25.00