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COVER LETTER

	ation Section n of Corporations		
SUBJECT: Se	edlacik Consulting LLC (Name of Lin	nited Liability Company)	
The enclosed Ar	ticles of Amendment and fee(s) are sub	omitted for filing.	
Please return all	correspondence concerning this matter	to the following:	
	Karen Sedlacik	Name of Person)	
	Sedlacik Consulting LI	Firm/Company)	
	4568 Merganser Cour	(Address)	
	Naptes, Florida 34119) /State and Zip Code)	 .
For further infor	rmation concerning this matter, please c	eall:	
Karen Sedlacik (Name of Person)		at (239) 592-5 (Area Code & Daytime	
Enclosed is a chec	ck for the following amount:		
☑ \$25.00 Filing l	Fee \$30.00 Filing Fee & Certificate of Status	S55.00 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/COU Registration Sec Division of Cor Clifton Building 2661 Executive	porations 5

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is	
Sedlacik Consulting LLC	
2. The Articles of Organization were filed on	and assigned document number
J. 110 day and day day and the appropriate	2 <i>-70</i> 05
4. A description of occurrence that resulted in the lim 608.441, Florida Statutes, (copy 608.441 on back of	ited liability company's dissolution pursuant to section over letter).
Karen Sedlacik retired at the end of 200	05.
5. CHECK ONE:	
	limited liability company have been paid or discharged.
-OR-	debts, obligations and liabilities pursuant to s. 608.4421.
 All remaining property and assets have been distril rights and interests. 	buted among its members in accordance with their respective
7. CHECK ONE:	
There are no suits pending against the con-OR-Adequate provision has been made for the entered against it in any pending suit.	satisfaction of any judgment, order or decree which may be
ignatures of the members having the same percentage of	of membership interests necessary to approve the dissolution:
Signature	Printed Name
Karen Ledlacik	Karen_Sedlacik
t s	NCLA
	2 2

FILING FEE: \$25.00