Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

C VESKOVSKI

Account Name : TRIPP SCOTT, P.A.

Account Number : 075350000065

: (954)525-7500

Phone Fax Number

: (954)761-8475

L. SELLERS

OCT 1.4 2010

EXAMINER

RECEIVED 10 OCT 13 AM 11: 22 SECRETASSEE FLORIDA ALLAHASSEE FLORIDA

LLC DISSOLUTION OR WITHDRAWAL LUMINA LASIK, LLC

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$55.00

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10 OCT 13 AH 8: 14

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

The name of a limited liability company is Lurnina Lasik, LLC	
2. The Articles of Organization were filed on Nove	ember 4, 2004 and assigned document number
3. The date the dissolution was approved:	14/2010
4. A description of occurrence that resulted in the lim 608.441, Florida Statutes, (copy 608.441 on back of Death of sole member	nited liability company's dissolution pursuant to section cover letter).
5. CHECK ONE:	
r→-OR-	limited liability company have been paid or discharged. debts, obligations and liabilities pursuant to 3, 608,4421.
	buted among its members in accordance with their respective
7. CHECK ONE;	
There are no suits pending against the com OR- Adequate provision has been made for the entered against it in any pending suit.	npany in any court, satisfaction of any judgment, order or decree which may be
natures of the members having the same percentage o	of membership interests necessary to approve the dissolution:
Signature,	Printed Name
Jan Jan	Massimo Musa, as Personal
	Representative of the Estate
	of Marco Musa
······································	
	FR R
PILIN	G PEE: \$25.00