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| Special Instructions to I | Filing Officer: | |
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Office Use Only



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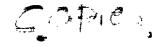


J. BRYAN MAR 2.7 2006

COVER LETTER

| Division of Corporations | |
|---|---------------|
| SUBJECT: ELEPHANTITO LLC (Name of Limited Liability Company) | |
| Dear Sir or Madam: | |
| The enclosed Resignation of Member, Managing Member or Manager and fee(s) are submitted for fil | ing. |
| Please return all correspondence concerning this matter to the following: | |
| GABRIElle NOYES (Name of Person) | DE APRIT PHIE |
| ELEPHANTITO LLC (Firm/Company) | |
| (Name of Person) ELEPHANTITO LLC (Firm/Company) 260 JSLAND DRIVE (Address) KEY BISCAYNE, FL 33/49 | 116 |
| KCY BISCAYNE, FL 33149 (City/State and Zip Code) | ં |
| For further information concerning this matter, please call: | |
| (Name of Person) at (305) 365 66 94 (Area Code & Daytime Telephone Number) | |
| STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314 | |
| Enclosed is a check for the following amount: | |
| \$25 Filing Fee \$ \$55 Filing Fee & CR2E079 (8/05) | |





FLORIDA DEPARTMENT OF STATE Division of Corporations

March 27, 2006

GABRIELLE NOYES ELEPHANTITO LLC 260 ISLAND DRIVE KEY BISCAYNE, FL 33149

SUBJECT: ELEPHANTITO, LLC Ref. Number: L05000013819

We have received your document for ELEPHANTITO, LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Number three of the document must contain the date the decision to dissolve was approved or became effective. This date must be prior to the date this document was submitted for filing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Letter Number: 206A00020489

Joey Bryan Document Specialist SIGN OF CORPORATIONS
SIGN OF PH 12: 56

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

| | PR PR |
|---|--|
| 1. The name of a limited liability company is | <u> </u> |
| FLEPHANTITO LLC | P 700 |
| | K. 2 |
| 2. The Articles of Organization were filed on <u>9714</u> | February 2005 and assigned document number |
| <u>L 05000013819 </u> | , and the second |
| 3. The date the dissolution was approved: /ST / | 1ARCH 2006. |
| 4. A description of occurrence that resulted in the limit 608.441, Florida Statutes, (copy 608.441 on back co | ed liability company's dissolution pursuant to section over letter). |
| GABNELLE dioyes is retiring | from the Company for puromal |
| | IA FRAMICCIANTI LO CONTINUNA |
| This business under her | company MOF Dedign Group |
| LLC THERE WAS A MUTUAL | Aguement |
| 5. CHECK ONE: | 0 |
| All debts, obligations and liabilities of the li | imited liability company have been paid or discharged. |
| OR- Adequate provision has been made for the d | lebts, obligations and liabilities pursuant to s. 608.4421. |
| All remaining property and assets have been distributing the rights and interests. | ited among its members in accordance with their respective |
| 7. CHECK ONE: | |
| There are no suits pending against the comp | any in any court. |
| OR- Adequate provision has been made for the s. | atisfaction 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 |
| 1 | |
| - Cold | CABRIELLE NOYES |
| | MARIA FRALLICCIARDI |
| | |
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| | |

FILING FEE: \$25.00