

LOS 000037728

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

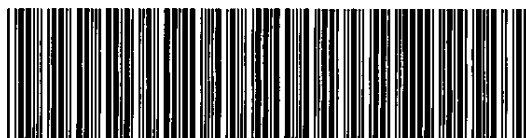
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**StraitRay Corporation
124 Calle De Leon
St. Augustine, FL 32086**

May 31, 2007

Florida Dept of Revenue
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: Corporate Forms

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Ladies and Gentlemen:

Our company is the Registered Agent for the companies listed below.
Please review and process the following enclosed forms:

LLC Resignation of Member Form	Asset Recover Specialists LLC
LLC Articles of Amendment Form	Platinum Mentorship Coaching LLC
LLC Articles of Dissolution Form	Home Saver Services LLC The Mitigator Group LLC Coast to Coast Capital LLC Skip Hunters LLC SimplePay LLC The Associate Group LLC
Corp Articles of Dissolution Form	Real Estate Asset Liquidators Inc. Xponent Inc.

If you have any questions, or need further information, please contact us
at 904-797-8779. Thank you for your service. Have a wonderful day!

Sincerely,



Gwen Larrett
Vice President

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: The Mitigator Group LLC

(Name of Limited Liability Company)

The enclosed Articles of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Gwen Larrett

(Name of Person)

StraitRay Corporation

(Firm/Company)

124 Calle De Leon

(Address)

St. Augustine, FL 32086

(City/State and Zip Code)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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For further information concerning this matter, please call:

Gwen Larrett

(Name of Person)

at (904) 797-8779

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☐ 30.00 Filing Fee &
Certificate of Status

☒ \$55.00 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/COURIER ADDRESS:

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

**ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is
The Mitigator Group LLC

2. The Articles of Organization were filed on April 18, 2005 and assigned document number
L05000037728

3. The date the dissolution was approved: June 30, 2007

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).

All members (by special meeting and in writing) have concluded that the business services will no longer be provided, and the company will be dissolved.

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 section 608.4421.

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

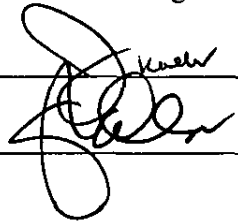
7. **CHECK ONE:**

- ☒ 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



Jeffrey Kaller

Sofia Kaller

