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(Cit	ty/State/Zip/Phone	#)
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Certified Copies	_ Certificates	of Status
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6 APR 28 PM 2: 2

PHIONED CONTROL

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: MUK TOUCH LLC (Name of Limited Liability Company)
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Steven M Wood (Name of Person)
Majik Tolk (Firm/Company)
13102 Chofs Creek Drive N
Jacksonville FL 32224 (City/State and Zip Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
Poffy K.Wood at 904 891-8310 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee Solution Signature Solution Status Solution

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



April 19, 2006

STEVEN M. WOOD 13102 CHETS CREEK DRIVE NORTH JACKSONVILLE, FL 32224

SUBJECT: MAJIK TOUCH LLC Ref. Number: L05000041070

We have received your document for MAJIK TOUCH LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain the effective date of the limited liability company's dissolution.

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) 245-6853.

Letter Number: 806A00024828

Leslie Sellers Document Specialist

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314



April 19, 2006

STEVEN M. WOOD 13102 CHETS CREEK DRIVE N JACKSONVILLE, FL 32224

SUBJECT: MAJIK TOUCH LLC Ref. Number: L05000041070

We have received your document for MAJIK TOUCH LLC and your check(s) totaling \$25.00. 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) 245-6853.

Letter Number: 106A00026656

Leslie Sellers Document Specialist

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

APPHONED ALB

06 APR 28 PM 2: 23

1. The name of a limited liability company is Maik Touch LL	SECRETARY OF S TALLAHASSEE, FLO
2. The Articles of Organization were filed on 497- 4050000 41070.	and assigned document number
3. The date the dissolution was approved:	06 4-10-06
4. A description of occurrence that resulted in the limited lia 608.441, Florida Statutes, (copy 608.441 on back cover leads to the cover leads to	ability company's dissolution pursuant to section etter).
disolved upon mut	val consent of all
nembers of the limit	ed Liability company
5. CHECK ONE:	
All debts, obligations and liabilities of the limite -OR- Adequate provision has been made for the debts,	d liability company have been paid or discharged. obligations and liabilities pursuant to s. 608.4421.
 All remaining property and assets have been distributed a rights and interests. 	among its members in accordance with their respective
7. CHECK ONE:	
There are no suits pending against the company -OR-	•
Adequate provision has been made for the satisfation entered against it in any pending suit.	action of any judgment, order or decree which may be
Signatures of the members having the same percentage of mem	bership interests necessary to approve the dissolution:
Signature	Printed Name
Steven wood	Steven M Wood
BettyKulood	Betty K. Wood
	•
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