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| (Red | uestor's Name) | | | |
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| (Address) | | | | |
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| (City | /State/Zip/Phone | e #) | | |
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| PICK-UP | ☐ WAIT | MAIL | | |
| | | | | |
| | | | | |
| (Business Entity Name) | | | | |
| | | | | |
| (Document Number) | | | | |
| | | | | |
| Certified Copies | Certificates | of Status | | |
| | | | | |
| On a sind broker alice on the 5 | | | | |
| Special Instructions to F | iling Officer: | | | |
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OT DEC 31 PH 12: 43
SECRETABLE OF STATE
SECRETABLE OF STATE

M.Thomas JAN 2 2008

COVER LETTER

TO:

Registration Section
Division of Corporations

| arytt f | 1924 1 9 Em | | |
|---------------|---|---|--|
| SUBJECT: | ORAXML LLC. | | |
| | | f Limited Liability Company) | |
| • | | | |
| The enclose | d Articles of Dissolution and fee(s) are | submitted for filing. | |
| Please return | n all correspondence concerning this ma | atter to the following: | |
| | VIJAY SINGH | , | |
| | *** | (Name of Person) | |
| | ORAXML LLC. | | |
| | | (Firm/Company) | |
| | 809 HICKORY FORK | DRIVE | |
| | - | (Address) | |
| | SEFFNER, FL 33584 | | 270 |
| | · · · · · · · · · · · (0 | City/State and Zip Code) | 题 第 8 |
| For further i | nformation concerning this matter, plea | se call: | OT DEC 31 PH 12: 1/3 SECRETARY OF STATE TALLAHASSEE. FLORIDA |
| VI | JAY SINGH | at (941) 704.4995 | H 12: 1.3 |
| | (Name of Person) | (Area Code & Daytime Telephone Number | 可 智訊 3 |
| Enclosed is a | check for the following amount: | | >> |
| \$25.00 Fili | ng Fee 30.00 Filing Fee & Certificate of Status | \$55.00 Filing Fee & S60.00 Filing Certified Copy Certificate of St | Fee, atus & |

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

...

STREET/COURIER ADDRESS:

Certified Copy

(additional copy is enclosed)

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

(additional copy is enclosed)

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

| 3. The date the dissolution was approved: 12/30/200 | |
|---|--|
| A description of occurrence that resulted in the limited 608.441, Florida Statutes, (copy 608.441 on back cover | liability company's dissolution pursuant to section |
| | 91 |
| 5. CHECK ONE: | TEC SECTION |
| All debts, obligations and liabilities of the limi | ited liability company have been paid or discharged. |
| OR- Adequate provision has been made for the debt | its, obligations and liabilities pursuant to s. 608.4421 |
| 6. All remaining property and assets have been distributed rights and interests. | ited liability company have been paid or discharged its, obligations and liabilities pursuant to s. 608.4421 |
| . CHECK ONE: | Ďu. |
| There are no suits pending against the company | y in any court. |
| OR- Adequate provision has been made for the satis entered against it in any pending suit. | sfaction of any judgment, order or decree which may be |
| natures of the members having the same percentage of me | embership interests necessary to approve the dissolution: |
| Signature | Printed Name |
| Wards | Vijay Singh |
| | |
| - | |

FILING FEE: \$25.00