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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	; #)
PICK-UP	TIAW [	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
		17/18
	Office Lies Onl	1014



12/05/05-01018-025 \*\*25.00

### COVER LETTER

		COV	ERLEITER					
TO:	Registration Section Division of Corporation		-		. –			
SUBJ	ECT:	Meride						
		(Name of Li	mited Liability Compan	i <b>y)</b>				
The en	nclosed Articles of Ar	mendment and fee(s) are sul	bmitted for filing.					
Please	return all correspond	lence concerning this matter	to the following:					
			dia Gont Name of Person)				-	•
			eriden Li Firm/Company)	LC		. <del>5</del>	•	. •
		3412	Clark Rd (Address)	# 226	2	• • • • •		
	Harris and the same	Sara	Sata F L /State and Zip Code)	3423	5/	SECRET	05 DEC -5 PM	
For fu		cerning this matter, please	call:			SEE PLON	5 PM 3:43	TLED
	<u>Clauo</u>	la M Gonthie Name of Person)	at (94/ (Area Co	735 de & Daytime	- 1693 Telephone Number		ည်	
Enclose	ed is a check for the fol	lowing amount:						
\$25.	00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee Certified Copy (additional copy i		\$60.00 Filing Certificate of Sta Certified Copy (additional copy	atus &	:d)	

#### 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  Meriden LLC	- =
2. The Articles of Organization were filed on 5/2 L \( \phi 5 b \) \( \phi b \) \( \phi 5 \) \( \phi \) \( \phi \)	and assigned document number
3. The date the dissolution was approved: 12-1-0;	5
4. A description of occurrence that resulted in the limited liab 608.441, Florida Statutes, (copy 608.441 on back cover let	oility company's dissolution pursuant to section tter).
Ceased to do business. Prin	
	SECH ALLAA
	共而 C SEL S
5. CHECK ONE:	PH PH
All debts, obligations and liabilities of the limited	liability company have been paid or designated.
Adequate provision has been made for the debts, of	obligations and liabilities pursuant to s. 608.4421.
<ol><li>All remaining property and assets have been distributed an rights and interests.</li></ol>	nong its members in accordance with their respective
7. CHECK ONE:	
There are no suits pending against the company in OR-  Adequate provision has been made for the satisfaction entered against it in any pending suit.	any court.
ignatures of the members having the same percentage of memb	pership interests necessary to approve the dissolution:
Signature	Printed Name
Claudia Lonth	Claudia Gonthier
· · · · · · · · · · · · · · · · · · ·	

# TILL!

#### RESOLUTION

I, the undersigned, Claudia GONTHIER, Secretary of MERIDEN LLC, a limited liability company duly organized and existing under the laws of the State of Florida hereby certify that a meeting of the Members of said limited liability company duly called and held on December 1, 2005, wherein a quorum of the Members being present and voting, the following resolutions were duly adopted in accordance with the Articles of Organization of said limited liability company:

Resolved, that Meriden LLC will dissolve effective December 1, 2005.

Further, that Meriden LLC, having never transacted any business in the State of Florida and no business to be transacted in the foreseeable future has decided to dissolve the company.

Further, There are no debts, obligations or liabilities outstanding.

Further, there are no assets of the company which have not been distributed among its members in accordance with their respective rights and interests.

Further, there are no suits pending against the limited liability company in any court.

#### CERTIFICATION

In witness whereof, I have hereunto set my hand as Managing Member of said limited liability company this 2<sup>nd</sup> day of December, 2005

Claudia Gonthier - Managing Member

State of Florida )
County of Sarasota)

On the \_3 day of December, 2005 before me, the undersigned, a Notary Public in and for the State appeared Claudia Gonthier to me known to be the identical person named in and who executed the foregoing Resolution of Meriden LLC., and acknowledged that she executed the same as her voluntary act and deed.

Notary Public

My Commission Expires:

02-12-2008

(Seal)

