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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: WIN PAR FILL 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:
William R. PARSONS
(Name of Person)
(Firm/Company)
PO BUX 371534 (Address)
(Address)
Cocoa Blach, FL 3293/ (City/State and Zip Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
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(additional copy is enclosed) Certified Copy Of
CICCL# 1101 (additional copy Englosed)

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 Win PAR Fili LLC
2. The Articles of Organization were filed on
3. The date the dissolution was approved: 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 resolved to dissolve the limited Liability by writter Consent.
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 s. 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 William R. PARSONS

FILING FEE: \$25.00