LD5D00015336

(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
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08/08/08--01025--013 **25.00

8 AUG -8 AM 8: 32

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: General Mortgage Solution Group, LC (Name of Limited Nidolity Company)
The enclosed Articles of Dissolution and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Simone Pinheiro (Name of Person)
(Firm/Company)
10901 NW 43RB Ln
Doral, FL 33178* (City/State and Zip Code)
For further information concerning this matter, please call:
Simone Pinheiro at (786) 277-1870 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \text{Certificate of Status} \ S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status & Certificate 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

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SECRETARY OF STATE TALLAHASSEE FLORIDA

1	Th				WELKINGSEE FEU	RIDA
1.	The name of a limited I	ortaae :	Solution	Croud	LLC	
2. 	The Articles of Organiza		08/02/200)5	and assigned document nu	ımber
4.	608,441. Florida Statutes	ice that resulted in the li	95/08 mited liability conscious cover letter). mar Ket.	npany's diss	olution pursuant to section	
	OR- Adequate provis	on has been made for th	ne debts, obligation	s and liabili	ve been paid or discharged ties pursuant to s. 608.442	1.
	rights and interests. CHECK ONE:	nd assets have been distr s pending against the co	·		necordance with their respe	ctive
	-OR- Adequate provisi		• •		, order or decree which ma	ıy be
Signa	tures of the members hav	ng the same percentage	of membership in	terests neces	sary to approve the dissolu	ition:
	Signature Sinhero	7		c Simon	Printed Name ne. Pinheiro	
1	hali			Nand	erson Silva	
		117,118		,		