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(Re	questor's Name	e)
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na/16/06--01039--011 **25.09

SECIECTION OF STATE

APROVED PARTY

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: JAAI Services, 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:
Nichole A. Prescod (Name of Person)
JAAI Services LLC (Firm/Company)
13403 Via Ruma Civcle (Address)
Clevmont, Ft 34711 (City/State and Zip Code)
For further information concerning this matter, please call:
Name of Person) at (407), 924-4124 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount: \$25,00 Filing Fee \$\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
MAILING ADDRESS: STREET/COURIER ADDRESS:

Registration Section Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

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

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

APPROVEL AND FILED

06 MAR 16 PM 3:55

1. The name of a limited liability company is	SECRETATE OF STATE TALLAHASSEE, FLORIDA
2. The Articles of Organization were filed on 8/LOSODOD 78407.	9105 and assigned document number
3. The date the dissolution was approved:	ed liability company's dissolution pursuant to section wer letter). N. PYIVIAUNG SEVIMUS
Adequate provision has been made for the d	mited liability company have been paid or discharged. ebts, obligations and liabilities pursuant to s. 608.4421. ted among its members in accordance with their respective
There are no suits pending against the component of the second of the se	any in any court. attisfaction of any judgment, order or decree which may be
Signatures of the members having the same percentage of	membership interests necessary to approve the dissolution:
Signature Nellole Mholae James L. (we)	Nichole A Prescod Janiar L. Prescod