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EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ABACUS PROFESSIONAL SERVICES GROUP, 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:

| RYAN E. WILLITS, ESQ. | | |
|--|---------------|------------|
| (Name of Person) | • | |
| WILLITS & ASSOCIATES, PA | | |
| (Firm/Company) | • | |
| 2499 Glades Road, Suite 210 | _ | |
| (Address) | ं.सूर्य अड | 2009 |
| Boca Raton, FL 33431 | CRET | 2009 JUL - |
| (City/State and Zip Code) | MARY ASSI | 1 |
| For further information concerning this matter, please call: | OF ST | AM 10: 24 |
| Ryan E. Willits _{at (} 561 ₎ 353-2400 | TATE ORIO | :24 |
| (Name of Person) (Area Code & Daytime Telephone Num | ber) | _ |
| Enclosed is a check for the following amount: | | |
| \$25.00 Filing Fee \$\ \times \text{30,00 Filing Fee & S55.00 Filing Fee & Certificate of Status} \text{Certified Copy (additional copy is enclosed)} \text{Certified Cop (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)} | `Status & | losed) |

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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| ted liability company's dissolution pursuant to section over letter). the members. See Section 608.441(1)(c), Florida Statute |
| the members. See Section 600.44 (Tyc), Florida Statute |
| Pro 2 |
| |
| imited liability company have been paid or his harged. lebts, obligations and liabilities pursuant to 608.4421. |
| ited among its members in accordance with their respective |
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| any in any court. |
| atisfaction of any judgment, order or decree which may be |
| membership interests necessary to approve the dissolution |
| Printed Name |
| TANA LYNN BONIELLO |
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FILING FEE: \$25.00