105000079397

(Re	equestor's Name)		
(Address)			
(Address)			
(Cit	ty/State/Zip/Phone	· #)	
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(Document Number)			
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FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

JAN 2 6 2007.

COVER LETTER

	egistration Section ivision of Corporations		
SUBJECT			
	(Name of Li	imited Liability Company)	
			·
The enclose	ed Articles of Dissolution and fee(s) are sub	omitted for filing.	
Please retui	rn all correspondence concerning this matte	r to the following:	
	Carol D. Wilson		
		Name of Person)	_
		(Firm/Company)	- 0 =
	·	(Tim/Company)	SEGI VISIO
	PO Box 909		N. SE
		(Address)	75 60
	Williston, FL 32696-090	09	PA POR
	(City	//State and Zip Code)	OT-JAN 25 PH 2: 51
			= 3
For further	information concerning this matter, please	call:	
C	arol Wilson	at (352) 528-4713	
	(Name of Person)	(Area Code & Daytime Telephone Nur	nber)
Englosed is	a abook for the following amounts		
\$25.00 Fi	a check for the following amount: ling Fee 30.00 Filing Fee &	\$55.00 Filing Fee & \$60.00 Fi	ling Fee
4 323.00 11	Certificate of Status	Certified Copy Certificate o	f Status &
		(additional copy is enclosed) Certified Co (additional copy)	opy is enclosed)
	MAILING ADDRESS:	STREET/COURIER ADD	RESS:
	Registration Section Registration Section		and and days a
	Division of Corporations Division of Corporations		
	P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle	

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

•	2. The Articles of Organization were filed on 8/11/20 L05000079397	and assigned document number
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). Unable to establish profitable business 5. CHECK ONE: All debts, obligations and liabilities of the limited liability company have been paid or discharged. 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 respect 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 entered against it in any pending suit. Signature Printed Name Troy G. Wilson	3. The date the dissolution was approved: 12/31/20	0 6
5. CHECK ONE: All debts, obligations and liabilities of the limited liability company have been paid or discharged. 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 respect rights and interests. 7. CHECK ONE: There are no suits pending against the company in any court. OR- OR- Adequate provision has been made for the satisfaction of any judgment, order or decree which may entered against it in any pending suit. Signature Printed Name Troy G. Wilson	4. A description of occurrence that resulted in the limited 608.441, Florida Statutes, (copy 608.441 on back coverage)	d liability company's dissolution pursuant to section er letter).
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Troy G. Wilson	rights and interests. 7. CHECK ONE: There are no suits pending against the comparation of the sate o	ny in any court. isfaction of any judgment, order or decree which may be
Troy G. Wilson	Signature	Printed Name
Carol D. Wilson	Hus Shila	Troy G. Wilson
1	Parof Divilon	Carol D. Wilson