

L05 0000 80943

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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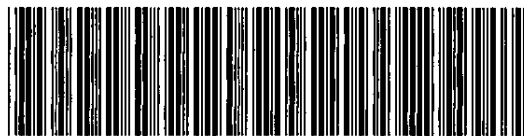
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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05/15/06--01021--009 **25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 MAY 15 AM 11:56

J. BRYAN MAY 22 2006

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MILLER-YOURKIEVITZ FINANCIAL 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:

CURTIS YOURKIEVITZ

(Name of Person)

MILLER-YOURKIEVITZ FINANCIAL SERVICES, LLC

(Firm/Company)

9054 2ND STREET N.

(Address)

ST. PETERSBURG, FL 33702

(City/State and Zip Code)

FILED STATE
SECRETARY OF CORPORATIONS
06 MAY 15 AM 11:56

For further information concerning this matter, please call:

CURTIS YOURKIEVITZ

(Name of Person)

at (727) 686-7137

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified 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**

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 MAY 15 11:58

1. The name of a limited liability company is

MILLER-YOURKIEVITZ FINANCIAL SERVICES, LLC

2. The Articles of Organization were filed on AUGUST 16, 2005 and assigned document number

LO5 000080943

3. The date the dissolution was approved: 5-6-06

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).

(C) MILLER-YOURKIEVITZ FINANCIAL SERVICES SHALL BE
DISSOLVED UPON THE WRITTEN CONSENT OF ALL THE MEMBERS
OF THE LIMITED LIABILITY COMPANY.

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

Curtis Yourkievitz
Michael Miller

CURTIS YOURKIEVITZ
MICHAEL MILLER