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SECRETARY OF STATE OIVISION OF CURPORATION

No B

T. HAMPTON

FEB - 3 2010

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: AI SolutionS 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: ALEXANDER ORTIZ
Alexander ORtiz (Name of Person) Ad Solutions LLC (Firm/Company)
8230 Sw 8c+ (Address)
North Lauderdale FL 33068 (City/State and Zip Code)
For further information concerning this matter, please call:
Alexander ORtiz at (954) 682-6566 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount: \$\sum_{\text{S25.00 Filing Fee}} \text{ \$\sum_{\text{S0.00 Filing Fee}} & \$\sum_{\text{Certificate of Status}} \text{ \$\sum_{\text{S55.00 Filing Fee}} & \$\sum_{\text{Certified Copy}} \text{ \$\sum_{\text{Certified Copy}} \text{ \$\text{Certified Copy} \text{ \$\text{Certified Copy} \text{ \$\text{(additional copy is enclosed)}} \text{ \$\text{Certified Copy} \text{ \$\text{(additional copy is enclosed)}} \text{ \$\text{Certified Copy} \text{ \$\text{(additional copy is enclosed)}} \text{ \$\text{Certified Copy} \text{ \$\text{(additional copy is enclosed)}} \text{ \$\text{Certified Copy} \text{ \$\text{(additional copy is enclosed)}} \text{ \$\text{Certified Copy} \text{ \$\text{(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



FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED

10 FEB -2 PM 4:00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

.January 21, 2010

ALEXANDER ORTIZ 8230 SW 8 CT N LAUDERDALE, FL 33068

SUBJECT: A-1 SOLUTIONS, LLC Ref. Number: L05000081347

We have received your document for A-1 SOLUTIONS, LLC. However, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$25.00. Your document will be retained in our pending file. Please return a copy of this letter to ensure that your check is properly credited.

Please return a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton Regulatory Specialist II

Letter Number: 710A00001669

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

SECRETARY OF STATE DIVISION OF GORPORATIONS

10 FEB -2 PM 4: 38

1. The name of a limited liability company is A 1 Solutions 4C.		
2. The Articles of Organization were filed on	and assigned document number	
3. The date the dissolution was approved: 13 JAN 2010		
4. A description of occurrence that resulted in the lin 608.441, Florida Statutes, (copy 608.441 on back of	nited liability company's dissolution pursuant to section cover letter).	
OUT OF BUSINESS		
5. CHECK ONE:		
All debts, obligations and liabilities of the OR-Adequate provision has been made for the	e limited liability company have been paid or discharged. e debts, obligations and liabilities pursuant to s. 608.4421. buted among its members in accordance with their respective	
7. CHECK ONE: There are no suits pending against the con-OR-	npany in any court. satisfaction of any judgment, order or decree which may be	
entered against it in any pending suit.	of membership interests necessary to approve the dissolution:	
Signature	Printed Name	
Shrander Oth	Alexander ORtiz	
Lourde N. Dits.	Lourdes I. Onliz	
		