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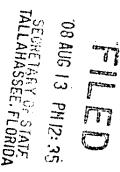
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EXAMINER

COVER LETTER

	ration Section on of Corporations		
SUBJECT:	S.A. LL	=	
_	(Name of I	Limited Liability Company)	
	articles of Dissolution and fee(s) are sulficerespondence concerning this matter	-	
	STAN	ULEY H. ARKIN	
		(Name of Person)	SEI SEI
			08 AUG SECKET
		(Firm/Company)	NSSE 13
	5500	(Address)	
		(Address)	G 13 PH 12: 35 ETAIN OF STATE HASSEE, FLORIDA
		1 BOACH , FL. , 33,40	O
	(Cit	ty/State and Zip Code)	·
For further info	rmation concerning this matter, please	call:	
	(Name of Person)	at (305) 992. (Area Code & Daytime Teleph	hone Number)
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	MAILING ADDRESS:	STREET/COURIER	R ADDRESS:
	Registration Section Division of Corporations	Registration Section Division of Corporati	ons
	P.O. Box 6327	Clifton Building	Ono

Tallahassee, FL 32314

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

12912005	_ and assigned document number	
18,2007	<u>.</u>	
ed liability company's dis ver letter).	solution pursuant to section	
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·	FEG 12	
mited liability company h	ave been paid ordischarged.	
ebts, obligations and liabi	lities pursuant to s. 608.4421.	
	•	
wa among to monitors in	accordance with their respective	
any in any court.		
•	t, order or decree which may be	
nembership interests nece	ssary to approve the dissolution	
	Printed Name	
STANL	BY H. ARKIN	
	BY II. NAMED IN	
	Ed (1) Marin	
	Ed (1) March	
	mited liability company hebts, obligations and liabilited among its members in any in any court.	