# 5000103011

(Red	uestor's Name)	
(Ado	iress)	
(Add	ress)	
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(City	/State/Zip/Phone	e #)
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PICK-UP	WAIT	MAIL
/Rus	iness Entity Nar	ne)
(One		
(Dec	cument Number)	
(DOC	ament Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	Filing Officer:	
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Office Use Only



100085625961

01/29/07--01010--015 \*\*\*25.00

# **COVER LETTER**

	eration Section on of Corporations			
SUBJECT: F	Phoenix Disaster Recovery, LLC (Name of Limited Liability Company)			
	(Name of Limited Liability Company)			
The enclosed A	articles of Dissolution and fee(s) are submitted for filing.			
Please return al	Il correspondence concerning this matter to the following:			
	Cecil T Salmon			
	(Name of Person)	•		. 🔻 - 🖫 -
	Rocena Inc.	₹		
	(Firm/Company)	SEDI	07 ر	enge,
	6375 Windmere Road	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	IAN 29	
	(Address)	SSE.	29	
	Brooksville FI 34601	13°C	H	
	(City/State and Zip Code)	ORIC ORIC	J: 52	
For further info	ormation concerning this matter, please call:	2714	∾	
Ced	il T Salmon <sub>at (</sub> 352 <sub>)</sub> 799-2668			
<del></del>	(Name of Person) (Area Code & Daytime Telephone Numb	er)	₹,	- ··
Enclosed is a che	cck for the following amount:			
<b>√</b> \$25.00 Filing	Fee 30,00 Filing Fee & \$55,00 Filing Fee & \$60,00 Filing Certificate of Status Certified Copy Certificate of Status (additional copy is enclosed) Certified Copy (additional copy is enclosed)	Status &	ied)	

### 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

2. The Articles of Organization were filed on 10/19 L05000103011	9/2005	and assigned	document nun	nber
3. The date the dissolution was approved: 12/31/2	2006			
4. A description of occurrence that resulted in the lim 608.441, Florida Statutes, (copy 608.441 on back c	ited liability company cover letter).	r's dissolution pursu	ant is section.	-
Written consent of existing membe	<u> </u>		AR AR	
	<u></u>	<u> </u>	RE P	(2)************************************
5. CHECK ONE:			52 805	***************************************
All debts, obligations and liabilities of the	limited liability comp	oany have been paid	or discharged.	
-OR- Adequate provision has been made for the	debts, obligations and	d liabilities pursuant	to s. 608.4421	
6. All remaining property and assets have been distributing rights and interests.	buted among its memb	ers in accordance w	ith their respec	tive
7. CHECK ONE:				
There are no suits pending against the com	apany in any court.			
Adequate provision has been made for the entered against it in any pending suit.	satisfaction of any ju	dgment, order or dec	cree which may	/ be
gnatures of the members having the same percentage o	of membership interes	ts necessary to appro	ove the dissolut	ion:
Signature		Printed Name	•	
Cacili. Salam	Cecil	T Salmon		
	<del> </del>			
	<u></u>		<u></u>	
		<u> </u>		<del></del>

FILING FEE: \$25.00