## 105000103239

(Requestor's Name)
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(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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(Business Entity Name)
(Document Number)
(Document Number)
Certified Copies Certificates of Status
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TALLANDAN E E STATE



## **COVER LETTER**

	Registration Section Division of Corporations		
CUD IEC	r: VALLEYS, LLC		
SUBJEC	(Name of L	imited Liability Company)	·
The enclo	sed Articles of Amendment and fee(s) are su	ubmitted for filing.	
Please ret	urn all correspondence concerning this matte	er to the following:	
		Ū	
	Michael D. Jacob, Esquire		
		(Name of Person)	· ·
	Schumann Law Group, P	P.A.	
		(Firm/Company)	<del></del>
	27200 Riverview Center I	Blvd., Suite 103	
		(Address)	· <del> 1 - 1 </del>
	Bonita Springs, Florida 34	134	
	(City	y/State and Zip Code)	
For furthe	r information concerning this matter, please	call:	
N	Michael D. Jacob	at ( 239 ) 949-45	529 .
	(Name of Person)	(Area Code & Daytime	Telephone Number)
Enclosed is	s a check for the following amount:		
<b>√</b> ] \$25.00 I	_	S55.00 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	STREET/COUR Registration Sectorics Division of Corp Clifton Building	orations

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

FROM SCHUMANN LAW GROUP, P. A.

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

2. The Articles of Organization were filled on 10/19/2005 and assigned document number 105000103239  3. The date the dissolution was approved: February 2006  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) Unless otherwise provided in the articles of organization or operating agreement, upon the written consent of all of 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:  [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 ugainst the company in any court.  [OR:  [O	4 D (4 A MODA)	
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Signature  Printed Name  KEITH CAMPBELL  AMAR -9 P	Adequate provision has been made for the sati	sfaction of any judgment, order or decree which may be
KEITH CAMPBELL SEPHERARY ALLAHASSEE	entered against it in any pending suit.	
SECRETARY STALLAHASSEE	• ., .	embership interests necessary to approve the dissolution:
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	gnatures of the members having the same percentage of me	Printed Name  KEITH CAMPBELL  AMABBELL  AMABBE

FILING FEE: \$25.00