L05000103669

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP   ☐ WAIT   ☐ MAIL

(Business Entity Name)
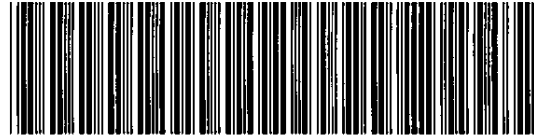
(Document Number)

Certified Copies _____   Certificates of Status _____

Special Instructions to Filing Officer:

GORLCVOLDS

Office Use Only

CSC

CORPORATION SERVICE COMPANY'

ACCOUNT NO.   : 072100000032

REFERENCE   : 865068   7584731

AUTHORIZATION   :

COST LIMIT   : $ 25.00

ORDER DATE : April 24, 2007

ORDER TIME : 10:18 AM

ORDER NO. : 865068-005

CUSTOMER NO: 7584731

DOMESTIC FILINGS

NAME: EMPYREAN, LLC

XX___ ARTICLES OF DISSOLUTION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX_____ PLAIN STAMPED COPY
_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Carina L. Dunlap - EXT# 2951

EXAMINER'S INITIALS: _____

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is

EMPYREAN, LLC

2. The Articles of Organization were filed on __10-5-06__ and assigned document number

L05000103669 __.__

3. The date the dissolution was approved: _____.

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).

_____

_____

_____

_____

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

                                             /S/: RICARDO FORGES

_____   _____

_____   _____

_____   _____

FILING FEE: $25.00