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| (Requestor's Name) |
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| (Address) |
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| (City/State/Zip/Phone #) |
| |
| PICK-UP WAIT MAIL |
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| |
| (Business Entity Name) |
| • |
| (Document Number) |
| |
| |
| Certified Copies <u>1942 1</u> Certificates of Status <u>2000 1949</u> |
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| Special Instructions to Filing Officer: |
| Special instructions to Filing Officer. |
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Office Use Only



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SECRETARY OF STATE
AND A SSEE. FLORIDA

J. BRYAN
OCT 14 2009
EXAMINER

COVER LETTER

| Division of Corporations |
|---|
| SUBJECT: 17 Management 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: |
| |
| Jenni Baker (Name of Person) |
| (Name of Person) |
| Jenemi Associates, Inc. Eg & |
| Jenemi Associates, Inc. (Firm/Company) UQQU Piazza Grande Avenuess Suite 202 (Address) Original O, PL 32835 |
| |
| Suite 202 (Address) Gay Piazza Grande Avenue 3 5 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 |
| SUIT 202 (Address) |
| Original Discourse City/State and Zip Code) |
| (City/State and Zip Code) |
| For further information concerning this matter, please call: |
| |
| Jenni Bakev at 321 293.0450 (Area Code & Daytime Telephone Number) |
| (Name of Person) (Area Code & Daytime Telephone Number) |
| Final and in a shock for the following amounts |
| Enclosed is a check for the following amount: \$25.00 Filing Fee \$30.00 Filing Fee & \$55.00 Filing Fee & \$60.00 Filing Fee, |
| Certificate of Status Certified Copy Certificate of Status & |
| (additional copy is enclosed) Certified Copy (additional copy is enclosed) |
| |

MAILING ADDRESS:

Registration Section

TO:

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

| 1. The name of a limited liability company is | 70 - |
|---|---------------------------------------|
| IP Management LC | 95 26 |
| 2. The Articles of Organization were filed on 11.14.2005 | and assigned document number |
| 3. The date the dissolution was approved: | |
| 4. A description of occurrence that resulted in the limited liability company's 6 608.441, Florida Statutes, (copy 608.441 on back cover letter). | · |
| company is no longer needed, | states. |
| has moved out of united | states. |
| | |
| | |
| 5. CHECK ONE: | |
| All debts, obligations and liabilities of the limited liability company OR- Adequate provision has been made for the debts, obligations and lia | |
| All remaining property and assets have been distributed among its members rights and interests. | in accordance with their respective |
| 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. | |
| Adequate provision has been made for the satisfaction of any judgmentered against it in any pending suit. | ient, order or decree which may be |
| Signatures of the members having the same percentage of membership interests no | ecessary to approve the dissolution: |
| Signature | Printed Name |
| Jame | es sheridan |
| | |
| | , , , , , , , , , , , , , , , , , , , |
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FILING FEE: \$25.00