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SECRETARY OF STATE

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: THE AMBORN GROUP LIC (Name of Limited Liability Company)
(Name of Limited Liability Company) .
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
DEBORAH KORFAGE- AMBORN (Name of Person)
THE AMBORN GROUP, UC (Firm/Company)
SEAMAN PLACE (Address)
DAY TONA BEACH, FL 32114 (City/State and Zip Code)
For further information concerning this matter, please call: TOZ
(Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
ρ \$25.00 Filing Fee ρ \$30.00 Filing Fee & ρ \$55.00 Filing Fee & ρ \$60.00 Filing Fee, Certificate of Status & Certificate of Status &

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

(additional copy is enclosed)

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

(additional copy is enclosed) - — Certified Copy

ARTICLES OF DISSOLUTION FOR FILED A LIMITED LIABILITY COMPANYSECRETARY OF STATE DIVISION OF CORPORATIONS

1. The name of a limited liability co	e name of a limited liability company is			
, *	MBORN G	ROUP LIC		•
2. The Articles of Organization were LO6 000000 270		HRY 3, 2006	and assigned document no	umber
3. The date the dissolution was approx	ved: D'u Gu	57 319, 7007		
4. A description of occurrence that res 608.441, Florida Statutes, (copy 60	sulted in the limited 8.441 on back cove	liability company's d	issolution pursuant to sectio	ņ
hpon written consent		•	gette lie.	
5. CHECK ONE:			· · · · · · · · · · · · · · · · · · ·	
All debts, obligations and I	liabilities of the lim	ited liability company	have been paid or discharge	d.
-OR- Adequate provision has been	en made for the deb	ts, obligations and liab	pilities pursuant to s. 608.44	21.
6. All remaining property and assets h rights and interests.	ave been distributed	d among its members i	n accordance with their resp	pective
7. CHECK ONE:		·		
There are no suits pending -OR-	against the compan	y in any court.		
Adequate provision has be entered against it in any per	en made for the sati nding suit.	sfaction of any judgmo	ent, order or decree which m	nay be
ignatures of the members having the sar	ne percentage of me	embership interests ne	cessary to approve the disso	lution:
Signature			- Printed Name	
Saboral Con Extudo	يا	Debora	h Korfage Am	nborn
	_		•	
	•			
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