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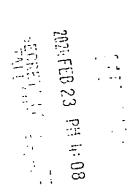
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COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT: _	AvDoc 51	LLC	
soboter	(Name of Limit	ted Liability Company)	
The enclosed .	Articles of Dissolution and fee(s) are submi	tted for filing.	
Please return a	all correspondence concerning this matter to	the following:	
	Angela C West		
	(Na	me of Person)	. 79
	Stallion 51 Corporation		20214 FEB (
	(Fir	m/Company)	2
	3959 Merlin Drive		ىن ئىد ئىد
		(Address)	
	Kissimmee, FL 34741		11,
	(City/St	ate and Zip Code)	
For further inf	formation concerning this matter, please call	:	
Ange	ela C West	407 935-0051 at ()	
	(Name of Person)	(Area Code & Daytime Telephone Numb	er)
Enclosed is a ch	neck for the following amount:		
\$25.0	00 Filing Fee and Certificate of Dissolution	☐ \$55.00 Filing Fee. Certificate of Dissolution & Certified Copy (additional copy is enclosed)	
Regi Divi P.O.	ing Address: istration Section sion of Corporations Box 6327 ahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

AvDoc 51 LLC		<u>*</u>
2. The Articles of Organization were filed on January	24. 2006 and assigned	
document number <u>1.06000008315</u>		
8. The delayed effective date the dissolution if not except the date cannot be prior to or Note: If the date inserted in this block does not meet listed as the document's effective date on the Department.	he applicable statutory filing requirements, this date	rtiling) e will no
4. A description of occurrence that resulted in the lin 605.0707. Florida Statutes, (copy 605.0707 on bac	nited liability company's dissolution pursuant to cover letter).	o sectio
	: : ين	<u> </u>
Sold Assets and closed business		hFED 2
	선생님	ယ်
. If there are no members, enter the name and addre	، بسمب	ianv ²
	so of the person appointed to tring up the comp	uny s
activities and affairs:		
Signature of an authorized person or if there are n bove to wind up the company's activities and affairs	members, the signature of the person appointe:	 ed and l
1.0 (1.) 1-	Angela C West	
in leta la vivero	Printed Name	

FILING FEE: \$25.00