L060000/3806

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RECRETARY OF STATE

ALLAHASSEE, FISHE

COVER LETTER

TO: Amendment Section

Division of Corporations	
SUBJECT: Mountain Island,	LLC.
DOCUMENT NUMBER: LOGOOOIS	3806
The enclosed Articles of Dissolution and fee are submitted	for filing.
Please return all correspondence concerning this matter to the	ne following: Zs B
Gary W. Evers (Name of Contact Person)	B JUN 1
Mountain Island	1, CLC EST R
(Firm/Company)	(J): (n
244 W. University	Ave.
(Address)	
Orange City, Fl (City/State and Zip Code)	- 32763
(City/State and Zip Code)	
For further information concerning this matter, please call:	
Garyw. Evers at (386) (Name of Contact Person) (Area	5) 775-0909
·	Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
\$\bigcup \\$35 \text{ Filing Fee \& \bigcup \\$43.75 \text{ Filing Fee \& \bigcup \\$43.75 \text{ Filing Fee \& \bigcup \\$43.75 \text{ Filing Certified Copy (Additional copenclosed)}	7
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

ORIDA DEPARTMEN

FLORIDA DEPARTMENT OF STATE Division of Corporations

June 2, 2008

GARY W. EVERS 244 W. UNIVERSITY AVE. ORANGE CITY, FL 32763

SUBJECT: MOUNTAIN ISLAND, LLC

Ref. Number: L06000013806

We have received your document for MOUNTAIN ISLAND, LLC, and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt Regulatory Specialist II

Letter Number: 408A00034247

Division of Companyations D.O. DOV 6297 Mellaharras Elevida 20014

COVER LETTER

TO: Registre Divisio	ation Section n of Corporations		
SUBJECT:	MOUNTAIN L	SLAND ILC	
SUBJECT.	(Name	of Limited Liability Company)	,
The enclosed Ar	ticles of Dissolution and fee(s) ar	re submitted for filing.	
Please return all	correspondence concerning this i	natter to the following:	
	Gas	Name of Person)	
		(Name of Person)	
		Acc	
		(Firm/Company)	-
	244 W. UN	OIVERSITY AVE. SERVE	
	GRANGE	CLTY FL 32763 55 TO City/State and Zip Code)	
For further inform	mation concerning this matter, ple	ease call:	
	Garyw. Eve	at (386) 77.5 - 09.09 (Area Code & Daytime Telephone Number)	_
Enclosed is a chec	k for the following amount:		
\$25.00 Filing Fo	30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & S60.00 Filing Fee, Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	losed)
	MAILING ADDRESS: 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	
MOUNTAIN ISLANG	
2. The Articles of Organization were filed on 2	and assigned domiment number
3. The date the dissolution was approved: 5) 7.4 4. A description of occurrence that resulted in the limited I 608.441, Florida Statutes, (copy 608.441 on back cover	iability company's dissolution pursuant to section letter).
NO LONGER OWN T	THE AIRPLAND, IT
OR-	ed liability company have been paid or discharged.
Adequate provision has been made for the debts 6. All remaining property and assets have been distributed rights and interests.	s, obligations and liabilities pursuant to s. 608.4421. among its members in accordance with their respective
7. CHECK ONE:	
There are no suits pending against the company -OR-Adequate provision has been made for the satis entered against it in any pending suit.	in any court. faction of any judgment, order or decree which may be
Signatures of the members having the same percentage of men	mbership interests necessary to approve the dissolution:
Signature	Printed Name
mas	Gary W. Evers