## 06000030734

(Requestor's Name)				
(Address)				
(Address)				
(Cit	ty/State/Zip/Phone	<b>∌</b> #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(50	isiness Entity (vai	ne)		
(Do	ocument Number)	<del></del>		
·				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				

Office Use Only



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07/26/07--01054--003 \*\*25.00

SECRETARY OF STATEMS
OF CORPORATIONS
OF 1111 26 PH 12: 28

MyCorporation\*
From the makers of QuickBooks

26520 Agoura Road Calabasas, CA 91302 Direct/intl': 1-818-879-9079 | Fax: 1-818-879-8005

r; 1-818-879-9079 [ Fax: 1-818-879-8005 e-mail: info@mycorporation.com

July 24, 2007

Division of Corporations Florida Department of State Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Re: Articles of Dissolution: LALIBU L.L.C.

Enclosed are two executed duplicate originals Articles of Dissolution for the above-referenced entity, as well as a check for \$25.00 as the appropriate fee.

Please return a letter of acknowledgment to the undersigned.

Thank you very much for your assistance.

Sincerely,

Post-Formation Filings My Corporation Business Services, Inc. 26520 Agoura Road Calabasas, CA 91302

PLEASE DIRECT ALL QUESTIONS REGUARDING THIS FILING REQUEST TO THE POST FORMATIONS DEPARTMENT AT 888.692.6771.

## **COVER LETTER**

	ation Section n of Corporations		
SUBJECT: LA	ALIBU L.L.C.		
	(Name of Li	mited Liability Company)	-
	ticles of Amendment and fee(s) are su	-	
	Post-F	ormation Filings Name of Person)	07 JUL 26 PH 12: 29
	My	Corporation	26
		(Firm/Company)	PH K
•	2652	0 Agoura Rd.	2: 29
		(Address)	
		s, California 91302  //State and Zip Code)	
For further infor	rmation concerning this matter, please	call:	
	Post Formations	at ( 888 ) 692-6	
	(Name of Person)	(Area Code & Daytime	: Telephone Number)
Enclosed is a chec	ck for the following amount:		
▼ \$25.00 Filing F	Fee \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		STREET/COU Registration Sec Division of Corp Clifton Building 2661 Executive Tallahassee, FL	porations 3 Center Circle

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is		
LA	LIBU L.L.C.	
2. The Articles of Organization were filed on	03/20/2006	and assigned document number
3. The date the dissolution was approved: May 08	3, 2007	·
4. A description of occurrence that resulted in the lin 608.441, Florida Statutes, (copy 608.441 on back		s dissolution pursuant to section
Upon the written consent of all the me	mbers of the limite	ed liability company
		07 U
		ny have been paid or discharge 15
5. CHECK ONE:		ر د د
✓ All debts, obligations and liabilities of th	e limited liability compa	平 ny have been paid or discharge起
-OR- Adequate provision has been made for the	e debts, obligations and	liabilities pursuant to s. 608.442
<ol> <li>All remaining property and assets have been distributed and interests.</li> </ol>	ributed among its membe	
7. CHECK ONE:		•
There are no suits pending against the co	mpany in any court.	
OR- Adequate provision has been made for the entered against it in any pending suit.	e satisfaction of any judg	gment, order or decree which may be
gnatures of the members having the same percentage	of membership interests	necessary to approve the dissolution:
Signature		Printed Name
Thurwardy	Raj Pal	Singh Kharabanda, Member
Edebal botrail	Adriana M. Beltran, Member	
•		

**FILING FEE: \$25.00**