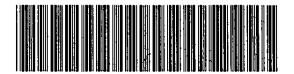
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(Re	questor's Name)			
(Ad	ldress)			
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PICK-UP	WAIT	MAIL		
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Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				
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SECRETARY OF STATE
TALL AHASSEE, FLORID

J. HARRIS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PST Designs, 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:

Pamela S Timm

(Name of Person)

PST Designs, LLC

(Firm/Company)

4013 Wellington Pkwy

(Address)

Palm Harbor, FL 34685

(City/State and Zip Code)

For further information concerning this matter, please call:

Pamela S Timm

(Name of Person)

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

□ \$25.00 Filing Fee and Certificate of Dissolution

\$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)

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 PST Designs, LLC	l liability compan	ny is			<u>_</u> .		
2. The Articles of Organ	2. The Articles of Organization were filed on April 13, 2006 and assigned						
document number LO	600039056						
Note: If the date inser	ted in this block do	ion if not effective on the date of filing:	uniciti is received	101 IIII			
605.0707, Florida Sta	rrence that result tutes, (copy 605.0	ed in the limited liability company's disso 1707 on back cover letter).	olution pursuar	ıt to se	ection		
Not profitable							
5. If there are no member activities and affairs:	ers, enter the nam Pamela S	te and address of the person appointed to	wind up the co	mpany	— /'s		
	4013 Wel	lington Pkwy					
	Palm Har	bor, FL 34685			_		
6. Signature of an autho listed above to wind up to	rized person or if he company's ac	there are no members, the signature of the tivities and affairs:	e person appo	inted a	— ınd		
A CONTRACTOR	,	Pamela S Timm	SECREI TALL AH	16 MAR	Send Services for the services of the services		
Signa	ture	Printed N					
		FILING FEE: \$25.00	P OF STAT	M 9: 5			