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| (Requestor's Name) | | | | | |
|---|-----------------------|--|--|--|--|
| (Address) | | | | | |
| (Address) | | | | | |
| (City/State/Zip/Phone #) | | | | | |
| PICK-UP | WAIT MAIL | | | | |
| (Business E | Entity Name) | | | | |
| (Document Number) | | | | | |
| . Certified Copies Co | ertificates of Status | | | | |
| Special Instructions to Filing Officer: | | | | | |
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SECRETARY OF STATE STATE OF CORPORATIONS OF CORPORATIONS OF CORPORATIONS

J. BRYAN

AUG 26 2008

EXAMINER

COVER LETTER

| | gistration Section vision of Corporations | • | |
|---------------|---|---|--|
| SUBJECT: | | SERVICES | |
| • | (Name of Limi | ted Liability Company) | |
| The enclose | nd Articles of Dissolution and fee(s) are submi | itted for filing. | · |
| Please return | n all correspondence concerning this matter to | the following: | |
| | Matthen | Stineman me of Person) | |
| | (Na | me of Person) | |
| | | | A Al |
| | (Fir | ти/Сотрапу) | |
| | 203 33eD | Ave V. | AUG 25 PM 4: 26 |
| | | (Address) | |
| 14. A. C. | ST- petersbuzg | FL 3370 | OB AUG 25 PM 4: 28 |
| | (City/S | ate and Zip Code) | |
| For further i | information concerning this matter, please call | l : | |
| | Matthew Stineman (Name of Person) | at (727) 249 (Area Code & Daytime To | 4 - 7340 elephone Number) |
| Englosed is a | check for the following amount: | , | • |
| \$25.00 Fili | <u> </u> | \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
| | MAILING ADDRESS: | STREET/COUR | |
| | Registration Section Division of Corporations | Registration Section Division of Corpo | |
| | P.O. Box 6327 Tallahassee, FL 32314 | Clifton Building 2661 Executive C | enter Circle |
| | - waxaaaaaay 1 | Tallahassee, FL 32 | |

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

| 1. The name of a limited liability compar | PAUEL | SERVICES | <i>Ę</i> . |
|--|--|---------------------------------------|--------------------------|
| 2. The Articles of Organization were filed | on May | 30, 2006 and as | signed document number |
| 3. The date the dissolution was approved:4. A description of occurrence that resulter 608.441, Florida Statutes, (copy 608.44 | Aug 31 d in the limited li l on back cover l | ability company's dissolution etter). | pursuant to section |
| Decided bysiness, intensive | | a profitable | venture and |
| 5. CHECK ONE: All debts, obligations and liabil OR-OR-Adequate provision has been m 6. All remaining property and assets have rights and interests. 7. CHECK ONE: | ade for the debts | obligations and liabilities pu | rsuant to s. 608.4421. |
| There are no suits pending again OR- Adequate provision has been mentered against it in any pending | ade for the satisf | | or decree which may be |
| ignatures of the members having the same po | ercentage of men | bership interests necessary to | approve the dissolution: |
| Signature Matthew Dune | | Printed Matthew | Name Stineman |
| | | | |
| | | | |
| | • | | |

FILING FEE: \$25.00