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| (Requestor's Name) | | |
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| (City/State/Zip/Phone #) | | |
| PICK-UP WAIT MAIL | | |
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| (Business Entity Name) | | |
| | | |
| (Document Number) | | |
| Certified Copies Certificates of Status | | |
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| Special Instructions to Filing Officer: | | |
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Office Use Only



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COVER LETTER

| TO: Registration Section Division of Corporations |
|---|
| SUBJECT: Chestone 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: |
| Maritza Collazo (Name of Person) |
| Master Tax Service Inc (Firm/Company) |
| 3846 Curry Ford Rd |
| Orlando, Fl 32806 으로 하 |
| (City/State and Zip Code) For further information concerning this matter, please call: Maritza Collazo 407 896-7113 |
| (Name of Person) (Area Code & Daytime Telephone Number) |
| Enclosed is a check for the following amount: \$\sum_{\text{\$\colored}}\$\$ \$25.00 Filing Fee \ |

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

| The name of a limited liability company is Chestone LLC | |
|--|---|
| 2. The Articles of Organization were filed on 08/04/200 L06000077499 | and assigned document number |
| 3. The date the dissolution was approved: 09/15/2008 | 2008 SEU TALI |
| 4. A description of occurrence that resulted in the limited liabil 608.441, Florida Statutes, (copy 608.441 on back cover lette There are personal financial details | ity company's dissolution pursuant to section ar). |
| dissolution. | OF STA |
| | of J |
| Adequate provision has been made for the debts, ob 6. All remaining property and assets have been distributed amorights and interests. 7. CHECK ONE: There are no suits pending against the company in a OR-Adequate provision has been made for the satisfaction entered against it in any pending suit. | ong its members in accordance with their respective |
| Signatures of the members having the same percentage of member | rship interests necessary to approve the dissolution: |
| Signature | Printed Name LAXWIND RODREWES. |
| | |
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| | |

FILING FEE: \$25.00