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	(Req	uestor's Name)	
	(Addı	ress)	
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	(City/	State/Zip/Phon	e #)
PICK-L	JP	MAIT	MAIL
	(Busi	ness Entity Nar	me)
		ument Number))
Certified Copies		Certificates	s of Status

Special Instructions to Filing Officer:

L. SELLERS

FEB 2 5 2010

EXAMINER

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02/24/10--01014--029 **25.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section Division of Corporations					
SUBJECT: Intornational Gate LLC. (Name of Limited Liability Company)					
(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:					
Madeleine D. Longaray P.A. (Name of Person)					
Longeron & Desociates Inc.					
8360 W. Flagler St. + 203					
H. am i - FC. 331XV					
(City/State and Zip Code)					
For further information concerning this matter, please call:					
(Name of Person) (Name of Person) (Area Code & Daytime Telephone Number)	 .				
Enclosed is a check for the following amount:					
\$25.00 Filing Fee 30.00 Filing Fee & Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) (additional copy is enclosed)	us &				

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		
INTERNATIONAL GA	te LLC	
2. The Articles of Organization were filed on	8/10/2006	and assigned document number
3. The date the dissolution was approved:	loven ber 200 5	effective Dec 3 / sno
508.441. Florida Statutes, (copy 608.441 on be Single member working Self-employed.)	ack cover letter).	
5. CHECK ONE: All debts, obligations and liabilities o	f the limited liability compar	ny have been paid or discharged.
OR-Adequate provision has been made fo		
 All remaining property and assets have been d rights and interests. 	istributed among its member	rs in accordance with their respective
7. CHECK ONE: There are no suits pending against the OR- Adequate provision has been made for entered against it in any pending suit.		gment, order or decree which may be
ignatures of the members having the same percent	age of membership interests	necessary to approve the dissolution:
Signature		Printed Name
V		TALL.
		RETARY AHASSE
		PR PR 2:
F	ILING FEE: \$25.00	2: 50 STATI FLORI