# L06000085443

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2009 APR 27 PM 2: 38
SECRETARY OF STATE

C. LEWIS

APR 2 8 2009

EXAMINER

# **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: COPA FAMILY 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:		
Patricia L. Korolov (Name of Person)		
(Firm/Company)		
16390 SE 47th AVE		
(Address)		
Summer Aeld, Fl 34491 (City/State and Zip Code)		
For further information concerning this matter, please call:		
Patricia Korder at 350, 307-6034		
(Name of Person) (Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount:		
\$25.00 Filing Fee & \$55.00 Filing Fee & \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed)  Certificate of Status & 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

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1. The name of a limited liability company is	SECRETARY OF STATE TALLAHASSEE, FLORIDA
2. The Articles of Organization were filed on 8000 85443	30 200 6 and assigned document number
3. The date the dissolution was approved:	121109
4. A description of occurrence that resulted in the life 608.441, Florida Statutes, (copy 608.441 on back	mited liability company's dissolution pursuant to section cover letter).
LLC has no assets (	and does not intend to
actively engage is	a business onymore.
5. CHECK ONE:	
OR- Adequate provision has been made for th  6. All remaining property and assets have been distr rights and interests.  7. CHECK ONE:  There are no suits pending against the co	e limited liability company have been paid or discharged.  e debts; obligations and liabilities pursuant to s. 608.4421.  ibuted among its members in accordance with their respective  mpany in any court.  e satisfaction of any judgment, order or decree which may be
Signatures of the members having the same percentage	of membership interests necessary to approve the dissolution:
Signature	Printed Name
Vat Haroles	Patricia L. Karoleu

FILING FEE: \$25.00