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(Re	equestor's Name)	
(Ar	ldress)	
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(Cit	ty/State/Zip/Phone	∍#)
PICK-UP	WAIT	MAIL
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(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: MOLINA ENTERPRISES, 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:
Please return all correspondence concerning this matter to the following: AUEL MOLIVA: (Name of Person)
MOLINA ENTENPISES, LLC (Firm/Company)
P-0. Box 823256 (Address)
DEMBROKE PINES, FL 33028 (City/State and Zip Code)
For further information concerning this matter, please call:
AVEL MOLINA at (954) 7077093 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount: \$25.00 Filing Fee 30.00 Filing Fee & S60.00 Filing Fee, Certificate of Status

MAILING ADDRESS:

TO:

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	ENTER PRISES	i, LLC
2. The Articles of Organization were filed on	09/08/2006	and assigned document number
3. The date the dissolution was approved:	MARCH 1st,	2011
4. A description of occurrence that resulted in the 608.441, Florida Statutes, (copy 608.441 on bac	limited liability company's ok cover letter).	lissolution pursuant to section
closed		2011 7.4.L.L
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		888
5. CHECK ONE:		
OR-Adequate provision has been made for a control of the control o	tributed among its members ompany in any court. the satisfaction of any judgm	in accordance with their respective
Signatures of the members having the same percentag	e ot membership interests ne	Printed Name
Signature	ANE	
	Rica	2 MOLINA. 4500 Molina