## LOWOOD 108355

(Requestor's Name)				
(Address)				
, ,				
(Address)				
(City/State/Zip/Phone #)				
<u>_</u>				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Business Entity Harrie)				
(Document Number)				
Certified Copies Certificates of Status				
<del> </del>				
Special Instructions to Filing Officer:				

Office Use Only



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09 AUG 21 PM 4: 30

SECRETARY OF STATE
TALLAHASSEF FINE

D. BRUCE

AUG 24 2009

**EXAMINER** 

## **COVER LETTER**

	ration Section on of Corporations			
SUBJECT:	INVESTINATI	ONSUC		
	(Name of L	Limited Liability Company)		<del></del>
The enclosed A	rticles of Dissolution and fee(s) are su	bmitted for filing.		
Please return all	correspondence concerning this matte	er to the following:		
		Name of Person)  NATIONS (CC) (Firm/Company)		09 AUG 2 SEGRETAF TALLAHAS
	378 Cour	OTRYSIDE KEY (Address)  Y F 346 y/State and Zip Code)	Blud	09 AUG 21 PH 4: 30 SEGRETARY OF STATE LLAHASSEE, FLORIDA
For further infor	rmation concerning this matter, please	call:		Λ
You	(Name of Person)	at ( 757 ) 54 (Area Code & Daytime	3-109 Telephone Number	<del>4</del>
Enclosed is a chec	ck for the following amount:			
\$25.00 Filing F	ee 30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60,00 Filing Certificate of Sta Certified Copy (additional copy	atus &
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		STREET/COU Registration Sec Division of Corp Clifton Building 2661 Executive Tallahassee, FL	etion corations Center Circle	ess:

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is	,
INVESTINATIONS	S CCC ·
2. The Articles of Organization were filed on	//- /- 06 and assigned document number
3. The date the dissolution was approved:6-1	1-09
4. A description of occurrence that resulted in the lin 608.441, Florida Statutes, (copy 608.441 on back	mited liability company's dissolution pursuant to section cover letter).
Investment GRO	UP DISSOLVED DUE TO LOSSE
<u> </u>	
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 control of	e limited liability company have been paid of Echaffed.  e debts, obligations and liabilities pursuant to 608.521.  ibuted among its members in accordance with her respective mpany in any court.  e satisfaction of any judgment, order or decree which may be
ignatures of the members having the same percentage	of membership interests necessary to approve the dissolution:
Signature	Printed Name
Jette Bilson	KETTELY WILSON
storda Bushbp	YOUODA BISHOP
Louela William	LOYETTA WILLIAMS
Milli Williams	NIKKIE WIWAMS
Shareese Mills	Shareese Miuis

**FILING FEE: \$25.00**