100011195

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

Office Use Only



800082721738

01/02/07--01053--013 **25.00

SECRETARY OF STATENE DIVISION OF CORPORATIONS 07 JAN -2 PH 3: 46

COVER LETTER

TO: Registration Section **Division of Corporations** SUBJECT: A SAFE PLACE 1331, LLC
(Name of Limited Liability Company) The enclosed member, managing member or manager resignation and fee(s) are submitted for filing. Please return all correspondence concerning this matter to: GLENN FARINACCI (Contact Person) LIBERTY TAX SERVICE 2275 S. FEDERAL HWY, SUITE 130 (Address) DELRAY BEACH, FL 33483 (City/State and Zip Code) For further information concerning this matter, please call: GLENN FARINACCI at (561) 279 0333

(Name of Contact Person) (Area Code & Daytime Telephone Number) Enclosed please find a check made payable to the Florida Department of State for: ✓ \$25 Filing Fee \$55 Filing Fee &____ Certified Copy STREET/COURIER ADDRESS: MAILING ADDRESS: Registration Section Registration Section **Division of Corporations Division of Corporations** Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314

CR2E079 (5/06)

Tallahassee, Florida 32301

EFFECTIVE DATE 12/27/06 SAME AS
DATA OF DISSOLVATION PLEAFE,

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

A SAFE PLACE 1331, LLC	
2. The Articles of Organization were filed on 11/16 L06000111195	/2006 and assigned document number
3. The date the dissolution was approved: 12/27/2	006
4. A description of occurrence that resulted in the limite 608.441, Florida Statutes, (copy 608.441 on back cov UNDER 608.441(C) BY WRITT	rer letter).
CONSENT OF ALL THE MEME	3ERS
OF THE LIMITED LIABILITY CO	
	J P
5. CHECK ONE:	46 94
-OR-	nited liability company have been paid or discharged.
Adequate provision has been made for the de	ebts, obligations and liabilities pursuant to s. 608.4421.
All remaining property and assets have been distribut rights and interests.	ed among its members in accordance with their respective
7. CHECK ONE:	
There are no suits pending against the compa	ny in any court.
OR- Adequate provision has been made for the sa entered against it in any pending suit.	tisfaction of any judgment, order or decree which may be
Signatures of the members having the same percentage of r	nembership interests necessary to approve the dissolution:
Signature	Printed Name
HOLED	FELICIA DICKSON
· .	

FILING FEE: \$25.00