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D. BRUCE
AUG 2 6 2008
EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Mondonce and Sol / LC (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:
Adnana Echevern (Name of Person)
(Firm/Company)
9020 SW BS ave #405 For
Migmi, FL 331870 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at (786) 768 3690 (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 Certified Copy (additional copy is enclosed) \$40.00 Filing Fee, 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

The name of a limited liability company is	Moondance and spa luc
2. The Articles of Organization were filed on	2 16 07 and assigned document number
3. The date the dissolution was approved:	lne 1,2008.
4. A description of occurrence that resulted in t 608.441, Florida Statutes, (copy 608.441 on	the limited liability company's dissolution pursuant to section back cover letter).
no sala, we had	
	NSS: 55 :
5. CHECK ONE:	INTE. S7
r—y-OK-	of the limited liability company have been paid or discharged. for the debts, obligations and liabilities pursuant to s. 608.4421.
 All remaining property and assets have been rights and interests. 	distributed among its members in accordance with their respective
7. CHECK ONE:	
There are no suits pending against the OR-Adequate provision has been made function and pending suits and pending suits.	for the satisfaction of any judgment, order or decree which may be
Signatures of the members having the same percen	ntage of membership interests necessary to approve the dissolution:
Signature	Printed Name
Checucallei	Adnana Erbeni
Blee.	Paola Enevern
_	

FILING FEE: \$25.00