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



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G. MCLEOD

JAN 14 2008

**EXAMINER** 

# **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: PASSION NAILS SALON 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:
Name of Person)
(Firm/Company)
12359 NW 27th PLACE (Address)
CORAL SPRINGS FL. 33065 (City/State and Zip Code)
For further information concerning this matter, please call:
TUAN MAI at (554) 298 - 2037  (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:  \$25.00 Filing Fee  Certificate of Status  Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)

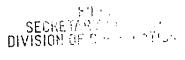
# **MAILING ADDRESS:**

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



08 JAN 11 PM 2: 20

1. The name of a limited liability company is	
PASSION NOILS SALON	LLC
2. The Articles of Organization were filed on	4 -4 - 0 7 and assigned document number
·	
3. The date the dissolution was approved:	
<ol> <li>A description of occurrence that resulted in the 608.441, Florida Statutes, (copy 608.441 on ba</li> </ol>	limited liability company's dissolution pursuant to section ck cover letter).
Retired	
5. CHECK ONE:	
G-OR-	the limited liability company have been paid or discharged.
<del>_</del> · ·	the debts, obligations and liabilities pursuant to s. 608.4421.  stributed among its members in accordance with their respective
rights and interests.	stributed among its members in accordance with their respective
7. CHECK ONE:	
There are no suits pending against the OR-	
Adequate provision has been made for entered against it in any pending suit.	the satisfaction of any judgment, order or decree which may be
Signatures of the members having the same percentage	ge of membership interests necessary to approve the dissolution:
Signature	Printed Name
Oals	
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THE TAX TO SEE THE THE TAX TO SEE TH	पुरु पुरु १९ म् १९९६ - अ <b>वस्</b> र पुरुष्या <u>त्र</u> व्यवस्था । १९ १ - १४ १ १ - १४
[[] (2] [[] (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	महाक्षा । जनसङ्ग्राचन के नाम के नाम है कुछ २ व्यवस्था अनुसार अने का विकास