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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Emerald Coast Mold Specialists, 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:
David Aprington (Name of Person)
(Firm/Company)
P.O. POX $O(Address)$ $P.O.$ POX POX
Destin, FL 32540 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at (850) 269-4656 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status &

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Certified Copy (additional copy is enclosed)

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

(additional copy is enclosed)

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is Emerald Coast So	ecialists. UC
2. The Articles of Organization were filed on	4-12-07 and assigned document number
 3. The date the dissolution was approved: 5. 4. A description of occurrence that resulted in the 608.441, Florida Statutes, (copy 608.441 on be considered). 	ne limited liability company's dissolution pursuant lossections pack cover letter).
Partnership di	ssolved Figure 3
-OR-Adequate provision has been made for 6. All remaining property and assets have been or rights and interests. 7. CHECK ONE: There are no suits pending against the OR-	or the satisfaction of any judgment, order or decree which may be
Signatures of the members having the same percent	Printed Name
	THICHAEL IS. NEW 1910r