# 1000056007

| (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: |
|   |
| A. LUNT                                 |
| APR <b>30</b> 2009                      |
|   |

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04/29/09--01034--013 \*\*30.00

# **COVER LETTER**

|                   | •                                 |                         |                                    | •                 |                                       |      |
|-------------------|-----------------------------------|-------------------------|------------------------------------|-------------------|---------------------------------------|------|
|                   | ration Section on of Corporations |                         |                                    |                   | •                                     |      |
| SUBJECT: _        | SPIZZISO                          | Services                | LC.                                |                   |                                       |      |
|                   |                                   | (Name of Limited        | Liability Company)                 |                   |                                       |      |
|                   |                                   |                         |                                    |                   |                                       |      |
| The enclosed A    | Articles of Dissolution ar        | nd fee(s) are submitted | d for filing.                      |                   |                                       |      |
| Please return al  | II correspondence conce           | ming this matter to th  | e following:                       |                   |                                       |      |
|                   |                                   |                         |                                    |                   |                                       |      |
|                   | SALVATO                           | re DOMA                 | NTi                                |                   |                                       |      |
|                   |                                   |                         | of Person)                         |                   |                                       |      |
|                   |                                   |                         | M                                  |                   | DOS A                                 | engs |
|                   |                                   | (Firm/                  | Company .                          |                   | 2009 APR 29<br>SECRETARY<br>ALLAHASSE | 9 -  |
|                   | 11320 N                           | N 28                    | Terrace                            |                   | RY OF                                 | F    |
|                   |                                   | (Ac                     | Idress)                            |                   | F ST                                  |      |
|                   | MAN                               | +1 22                   | 178.                               |                   | PH 1:58                               | ,    |
|                   |                                   | (City/State             | and Zip Code)                      |                   |                                       |      |
|                   |                                   |                         |                                    |                   |                                       |      |
| For further info  | ormation concerning this          | matter, please call:    |                                    |                   |                                       |      |
| SA                | WATORCDOM                         | _ Augu                  | at (786                            | 201990            | ٩                                     |      |
|                   | (Name of Per                      | son)                    | (Area Code                         | & Daytime Telepho | ne Number)                            |      |
| Enclosed is a cho | eck for the following amou        | nt:                     |                                    |                   |                                       |      |
| 了、s25.00 Filing   | Fee 30.00 Fi                      | ling Fee &              | \$55.00 Filing Fee &               |                   | 0.00 Filing Fee,                      |      |
|                   | Certific                          | cate of Status          | Certified Copy (additional copy is | enclosed) Certif  | Ticate of Status & fied Copy          | ls   |

## **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

| 1. The name of                | of a limited liability   | company is  SEL | ulres                               | 110                            |                   |             |                 |
|-------------------------------|--|-----------------|-------------------------------------|--------------------------------|-------------------|-------------|-----------------|
|                               | of Organization we   |                 | 05/29/                              | 2007.                          | and assig         | gned docum  | nent number     |
|                               | dissolution was app  |                 | <u>ug 2</u> 1                       | )OS.                           | ·                 |             |                 |
| 4. A description 608.441, Flo | of occurrence that<br>rida Statutes, (copy<br>CANPANY                      | 608,441 on bac  | imited liability in the cover lette | ity company's d<br>r).<br>Deno | <br>است           | ursuant to  | TO A C F        |
| AND                           | WENT   |                 | 0F                                  | BUSINE                         |                   | SEURI       | APR 11          |
|                               |  |                 |                                     |                                |                   | HASSE       | <sup>8</sup> 29 |
| OD                            | debts, obligations ar  |                 |                                     |                                |                   | (Carri      | Ψ1              |
| Ade                           | quate provision has g property and asse                                    |                 |                                     |                                |                   |             |                 |
| 7. CHECK ON                   |  |                 |                                     |                                |                   |             |                 |
| OR Ade                        | re are no suits pend<br>k-<br>quate provision has<br>red against it in any | been made for t |                                     | •                              | nent, order or    | r decree wi | nich may be     |
| Signatures of the n           | members having the   | same percentag  | e of member                         | ship interests no              | ecessary to a     | pprove the  | dissolution:    |
|                               | nature   |                 |                                     | 340                            | Printed N<br>UATO |             | buan            |
| fldek                         | afilins  | eve_            |                                     | FEG                            | FRICA             | Fili        | MBAIA           |
|                               |  |                 |                                     |                                |                   |             | 1000            |
|                               |  |                 |                                     |                                |                   |             |                 |