

(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
(Otty/Otato/Elp/ Hone II)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
1 054

L. SELLERS

JAN - 6 2010

EXAMINER

Office Use Only



900164001389

01/04/10--01034--010 **30.00

SECRETARY OF SISIC TALLAHASSEE FLORID

COVER LETTER

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ee, is & enclosed)
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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 a limited liability company is	
G-Capital Ally	ance
2. The Articles of Organization were filed on	and assigned document number
3. The date the dissolution was approved:	.c 31,2009
4. A description of occurrence that resulted in the 608.441, Florida Statutes, (copy 608.441 on b	ne limited liability company's dissolution pursuant to section back cover letter).
5. CHECK ONE:	
OR-	of the limited liability company have been paid or discharged. or the debts, obligations and liabilities pursuant to s. 608.4421.
 All remaining property and assets have been orights 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 for entered against it in any pending suit.	e company in any court. or the satisfaction of any judgment, order or decree which may be
Signatures of the members having the same percent	tage of membership interests necessary to approve the dissolution:
Signature	Printed Name
de la companya del companya del companya de la comp	Janna Balich
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	UAN - CRETA AHAS
F	ILING FEE: \$25.00
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