L07000091451

(P.a	equestor's Name)		
(Re	questors Name)		
(Ad	ldress)		
(Address)			
(Cit	ty/State/Zip/Phone	e #)	
PICK-UP	MAIT WAIT	MAIL	
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SECRETARY OF STATE

J. SAULSBERRY EXAMINER NOV 30 2010

COVER LETTER

Registration Section

TO:

Division of Corporations		
SUBJECT: JPaul LLC		
	imited Liability Company)	
The enclosed Articles of Dissolution and fee(s) are sul	bmitted for filing.	
Please return all correspondence concerning this matter	er to the following: Common of Person Common of Person	
Clint Keller	୍ଷ୍ୟୁ ଓ ଅନ୍ୟୁ ଅନ୍ୟୁ	
	(Name of Person)	
Pillsbury Winthrop Sha	w Pittman LLP 기계	
	(Firm/Company)	
50 Fremont Street		
	(Address)	
San Francisco, CA 941	105	
(Ciŋ	y/State and Zip Code)	
For further information concerning this matter, please	call:	
Clint Keller	_{at (} 415) 9831649	
(Name of Person)	(Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:		
\$25.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & S60.00 Filing Fee, Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, Certificate of Status & 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 JPaul LLC		2010 NOV 2 SECRETA
2. The Articles of Organization were filed on L07000091451)6/2007 and as	ssigned document in her
3. The date the dissolution was approved: 11/19/	<u>'2010</u>	:50 TATE ORIO
4. A description of occurrence that resulted in the lin 608.441, Florida Statutes, (copy 608.441 on back Upon the occurrence of events sp		
(i.e., the action of a managing me	mber)	
All debts, obligations and liabilities of the OR-OR-Adequate provision has been made for the 6. All remaining property and assets have been distrights and interests. 7. CHECK ONE: There are no suits pending against the co-OR-Adequate provision has been made for the entered against it in any pending suit.	ributed among its members in accord impany in any court. The satisfaction of any judgment, order	ursuant to s. 608.4421. Iance with their respective
Signature		d Name
min Dr.	Ingrid Bon	

FILING FEE: \$25.00