(Rec	questor's Name)		
(Add	iress)		
	I		
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COVER LETTER

	istration Section sion of Corporations		
SUBJECT:	4343 HARGRAVE STRE		
	(Name of L	imited Liability Company)	
	Articles of Dissolution and fee(s) are sul all correspondence concerning this matter	-	
	George L. Romanacce	, Mbr	
(Name of Person)			
Promotive Agenda, LLC			
(Firm/Company)			
	PO. BOX 522142		
		(Address)	
	Longwood, FL 32752		
	(City	//State and Zip Code)	
For further in	formation concerning this matter, please	call:	
Ge	orge L. Romanacce	at (_407) 260-	5292
	(Name of Person)	(Area Code & Daytime	Telephone Number)
Enclosed is a cl	heck for the following amount:		
\$25.00 Filing	g Fee 30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	MAII INC ADDDECC		

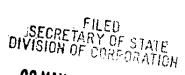
MAILING ADDRESS:

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 MAY -6 PM 2: 1.0

and assigned document number
liability company's dissolution pursuant to section r letter).
ted liability company have been paid or discharged. ts, obligations and liabilities pursuant to s. 608.4421.
d among its members in accordance with their respective
y in any court. sfaction of any judgment, order or decree which may be
embership interests necessary to approve the dissolution:
Printed Name
George L. Romanacce
Arlene A. Romanacce
for Promotive Agenda, LLC
<u>-</u>

FILING FEE: \$25.00