

207000104965

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

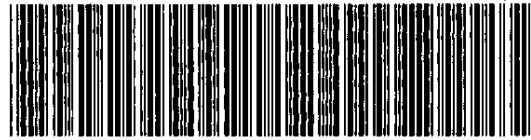
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:
A. LUNT
JUN 18 2010
EXAMINER

Office Use Only



800182052398

06/17/10--01016--002 **25.00

2010 JUN 17 PM 1:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Snowy River Explorers 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 Scott Wilson
(Name of Person)

(Firm/Company)

19263 SW 5th Street
(Address)

Pembroke Pines, FL 33029
(City/State and Zip Code)

2010 JUN 17 PM 1:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

For further information concerning this matter, please call:

David Scott Wilson at (954) 661-1305
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

\$25.00 Filing 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)

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
Snowy River Explorers LLC

2. The Articles of Organization were filed on October 16, 2007 and assigned document number
L07000104965

3. The date the dissolution was approved: April 28, 2010

4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section
608.441, Florida Statutes, (copy 608.441 on back cover letter).

All members agreed to terminate operations in order to pursue other professional opportunities.

5. CHECK ONE:

- All debts, obligations and liabilities of the limited liability company have been paid or discharged
-OR-
 Adequate provision has been made for the debts, obligations and liabilities pursuant to s. 608.4421.

6. All remaining property and assets have been distributed among its members in accordance with their respective rights and interests.

7. CHECK ONE:

- There are no suits pending against the company in any court.
-OR-
 Adequate provision has been made for the satisfaction of any judgment, order or decree which may be entered against it in any pending suit.

Signatures of the members having the same percentage of membership interests necessary to approve the dissolution:

Signature

Printed Name

David Scott Wilson
Teresita Ortiz

David Scott Wilson

Teresita Ortiz

2010 JUN 17 PM 1:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED