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G. MCLEOD

MAR 1.8.2011

EXAMINER



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11 MAR 17 AN IO: 31
SECRETARY OF STATE
ALLAHASSEE, FLORID

COVER LETTER

TO: Registration Section Division of Corpora			
SUBJECT:	1ARTIN & A. (Name of Lin	SSOCINTES, LLC mited Liability Company)	
The enclosed Articles of Diss Please return all corresponden		_	
		Name of Person)	
	,	ASSOCIATES, LLC Firm/Company) CEGIS WAY (Address)	-
		(Áddress) (Address) (Address) (Address) (State and Zip Code)	
For further information conce			1 2641
<u>lhomas</u> (N	MCHUGH ame of Person)	at (<u>386</u>) <u>767</u> (Area Code & Daytime	Telephone Number)
Enclosed is a check for the follows: \$25.00 Filing Fee	wing amount: 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)
Registrati	G ADDRESS: on Section of Corporations 6327	STREET/COUI Registration Sec Division of Corp Clifton Building	porations

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is			
T. MARTIN & ASSOCIATE	ES, LLC		
2. The Articles of Organization were filed on	2/23/2010	and assigned document	numbei
 3. The date the dissolution was approved: 12/ 4. A description of occurrence that resulted in the limit 608.441, Florida Statutes, (copy 608.441 on back company) 	ed liability company's ver letter).	dissolution pursuant to secti	
Bad Economy			
5. CHECK ONE: All debts, obligations and liabilities of the defendance of the defendance of the defendance of the defendance of the liabilities o	lebts, obligations and listed among its members any in any court.	abilities pursuant to s. 608.4 in accordance with their res	421. spective
Adequate provision has been made for the s entered against it in any pending suit. Signatures of the members having the same percentage of			
Signature The Act of the State	<u>~.</u> .	Printed Name ALCO	
Thoms Wedges	/μο.	LAHAS MAN DARY D	R 7
		COF STATE EE. FLORIDA	출 (증 (~

FILING FEE: \$25.00