107000115792

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COVER LETTER, .

TO: Registration Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations			
SUBJECT: JAM LESSING LLC (Name of Limited Liability Company)			
(Came in animos alcomy company)			
The enclosed Articles of Dissolution and fee(s) are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
JERRY FASCNAUTT (Name of Person)			
(Name of Person)			
JOYI LEAGING, LLC (Firm/Company)			
(Firm/Company)			
1009 RONNOSTOME PLACE			
PALM HARROR, FLORIDA 34683 (City/State and Zip Code)			
For further information concerning this matter, please call:			
JERRY FASSUAUT at (127) 480 - 7978 (Name of Person) (Area Code & Daytime Telephone Number)			
(Name of Person) (Area Code & Daytime Telephone Number)			
Enclosed is a check for the following amount:			
\$25.00 Filing Fee and Certificate of Dissolution \$\Pi\$\$ \$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)			
MAILING ADDRESS. CODEST/COUDIED ADDRESS			
MAILING ADDRESS: STREET/COURIER ADDRESS: Registration Section Registration Section			
Division of Corporations Division of Corporations			

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	
	JAM LEAGING, LLC	ر
2.	2. The Articles of Organization were filed on 11/15/2	and assigned
	document number <u>L0700015792</u>	
3.	3. The delayed effective date the dissolution if not effective on (effective date cannot be prior to or more than 90 on Note: If the date inserted in this block does not meet the applicable listed as the document's effective date on the Department of State's	days later than date document is received for filing) le statutory filing requirements, this date will not be
4.	4. A description of occurrence that resulted in the limited liabili 605.0707, Florida Statutes, (copy 605.0707 on back cover lett	ity company's dissolution pursuant to section er).
	CONSENT OF WESTE	ans.
		1
5.	5. If there are no members, enter the name and address of the peactivities and affairs:	erson appointed to wind up the company's
	.	
6. lis	6. Signature of an authorized person or if there are no members, listed above to wind up the company's activities and affairs:	the signature of the person appointed and
	-All Co	RMO FREENACHT
	Signature	Printed Name

FILING FEE: \$25.00