L08000014693

| (Red | questor's Name) | |
|---|-------------------|-----------------|
| (Address) | | |
| (Address) | | |
| (City | //State/Zip/Phone | (#) |
| PICK-UP | WAIT | MAIL |
| (Business Entity Name) | | |
| (Document Number) | | |
| Certified Copies | Certificates of | of Status |
| Special Instructions to Filing Officer: | | |
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COVER LETTER

TO: Regis

Registration Section Division of Corporations

SUBJECT: MAGIC TOUCH DECORATING AND TURNKEY SOLUTIONS L.L.C.

(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:

| Janice Null | | | | |
|--|-------------|--|--|--|
| (Name of Person) | | | | |
| Incorp Services, Inc. (Firm/Company) | | | | |
| 375 N. Stephanie St., Suite 1411 | | | | |
| (Address) | | | | |
| Henderson, NV 89014-8909 | | | | |
| (City/State and Zip Code) | | | | |
| For further information concerning this matter, please call: | | | | |
| Janice Null/ Incorp Services, Inc. (Name of Person) at (702 Area Code & Daytime Telephone Number) | <u>02</u> 7 | | | |
| Enclosed is a check for the following amount: | | | | |
| \$25.00 Filing Fee \$\ \text{Certificate of Status} \] \$30.00 Filing Fee \$\ \text{Certified Copy} \\ \text{(additional copy is enclosed)} \] \$60.00 Filing Fee \$\ \text{Certificate of Status} \] \$Certificate of Status \text{Certified Copy} \\ \text{(additional copy is enclosed)} \] \$25.00 Filing Fee \$\text{Certified Copy} \\ \text{(additional copy is enclosed)} \] | s & | | | |

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

09 FEB 16 AM 10: 53

| The name of a limited liability company is MAGIC TOUCH DECORATING AND TURNKEY | SECRETARY OF STATE TALLAHASSEE FLORIDA |
|---|--|
| 2. The Articles of Organization were filed on L08000014693 | 8 and assigned document number |
| 3. The date the dissolution was approved: Feb. 6 | 2009 |
| 4. A description of occurrence that resulted in the limited 608.441. Florida Statutes. (copy 608.441 on back cover | ·— , |
| Munted sus | ress |
| 5. CHECK ONE: | , |
| -OR- | ted liability company have been paid or discharged. |
| 6. All remaining property and assets have been distributed rights and interests. | |
| 7. CHECK ONE: | |
| There are no suits pending against the company OR- Adequate provision has been made for the satis entered against it in any pending suit. | sfaction of any judgment, order or decree which may be |
| ignatures of the members having the same percentage of me | mbership interests necessary to approve the dissolution: |
| Signature | Printed Name |
| Virginia M. Sumden | Virginia M. Snowden |
| | |
| | |
| | |
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