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(Re	questor's Name)	<u></u>
(Ad	dress)	
DA)	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP		MAIL
(Bu	siness Entity Nan	ne)
(Dod	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	Filing Officer:	
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Office Use Only

G. MCLEOD

APR - 9 2009

EXAMINER



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COVER LETTER

	egistration Section vision of Corporations	
SUBJECT	PELASGIAN CONSULTING ENGINEERING GROUP	LLC
50101101	(Name of Limited Liability Company)	
The enclose	ed Articles of Dissolution and fee(s) are submitted for filing.	
Please retur	m all correspondence concerning this matter to the following:	
	IOANNIS KOUFO POULOS	
	(Name of Person)	
	(Firm/Company)	
	10710 NW 665+ #402	
	(Address)	
	MIAMI FL 33178.	
	(City/State and Zip Code)	
For further	information concerning this matter, please call:	
	305 1 30 6 77.	
	(Name of Person) (Area Code & Daytime Telephone Number)	
Enclosed is a	check for the following amount:	
\$25.00 Fil	ing Fee 30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	
	MAILING ADDRESS: STREET/COURIER ADDRESS: Registration Section Registration Section	
	Division of Corporations P.O. Box 6327 Clifton Building	

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

रका पुरस्कार अञ्चलका वा राज्य कर राष्ट्र प्रकार । अन्य कर स्कू

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

	f Organization we の2 <i>546</i> /	ere filed on MA	RCH, 11,	, 2008	and assigned	document num
		resulted in the limit 608.441 on back co			olution pursua	nt to section
		BUSINES!			AREA.	20 - 8 - 8
						2.
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						26
-OR- Adequ	•	ing against the comp been made for the si pending suit.	•		, order or decr	ree which may
anatures of the me	mbers having the	same percentage of	membership	interests neces	sary to approv	e the dissolution
silatares et the inc				1	Printed Name	
Signa	ture					
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	ture		<u> </u>	OANNIS	KOUFOP	oolos.
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