108000028818

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19 MAR 31 AM 8: 36 SECRETARY OF STATE VITAHASSEE FLORIS

COVER LETTER

	ntion Section n of Corporations
SUBJECT:	Scotty's Grove, L.J. (Name of Limited Liability Company)
The enclosed Art	cicles of Dissolution and fee(s) are submitted for filing.
Please return all	correspondence concerning this matter to the following:
-	Name of Person)
-	N 13 (Firm/Company)
-	3733 NE 214 Street
-	Aventura Porda 33180 (City/State and Zip Code)
For further inform	nation concerning this matter, please call:
I) ia ne Sco Ho at (305) 773 - 4906 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check	s for the following amount:
\$25.00 Filing Fe	S\$55.00 Filing Fee & S60.00 Filing Fee. Certificate of Status Certified Copy Certified Copy (additional copy is enclosed) S\$60.00 Filing Fee. 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



March 11, 2009

DIANE SCOTTO 3733 NE 214 STREET AVENTURA, FL 33180

SUBJECT: SCOTTY'S GROVE, LLC

Ref. Number: L08000028878

We have received your document for SCOTTY'S GROVE, LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Number three of the document must contain the date the decision to dissolve was approved or became effective. This date must be prior to the date this document was submitted for filing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Letter Number: 309A00008316

Leslie Sellers Regulatory Specialist II

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

FILED

09 MAR 31 AM 8: 36

1. The name of a limited liability company is	SECRETARY OF STATE TALLAHASSEE FLORIDA
2. The Articles of Organization were filed on Marc	
3. The date the dissolution was approved:	Jebnary 24, 2009
4. A description of occurrence that resulted in the limited 608.441, Florida Statutes, (copy 608.441 on back cover	liability company's dissolution pursuant to section r letter).
Single member 22	2 is no Longer
conducting business	<u> </u>
5. CHECK ONE:	
OR- Adequate provision has been made for the deb	ited liability company have been paid or discharged. ts, obligations and liabilities pursuant to s. 608.4421.
All remaining property and assets have been distributed rights and interests.	I among its members in accordance with their respective
7. CHECK ONE:	
There are no suits pending against the company	y in any court.
	sfaction of any judgment, order or decree which may be
Signatures of the members having the same percentage of me	embership interests necessary to approve the dissolution:
Signature	Printed Name
Jan Jate	Diane Scotto