# L08000036082

	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-U	P WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instruction	s to Filing Officer:
	A. LUNT
	APR 24 2009

**EXAMINER** 

Office Use Only

600151434196

2009 APR 23 PH 2: 29
SECRETARY OF STATE
AND SEFE, FLORID!

04/23/09--01017--031 \*\*25.00

# COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Lurdemy LLC (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:
(Name of Person)  (Firm/Company)  (Firm/Company)  (Firm/Company)  (Address)  (Address)  (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) to Clear at (305) 512-8689 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee & S55.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed)  \$60.00 Filing Fee, Certificate of Status & 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

### ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is			•	
Lurde	mir LLC			
2. The Articles of Organization were filed on	119/08	and assigned do	ocument numb	er
3. The date the dissolution was approved:	5/09	· >	<b>2009</b>	
4. A description of occurrence that resulted in the limit 608.441, Florida Statutes, (copy 608.441 on back of	ited liability company's over letter).	s dissolution pursually	to section •	Π
For some reason	this LLC	Lucy (3	\$0.00°	
- twice			7 <b>2</b>	
			S 2	<u></u>
		<u>`</u>	⊃m <b>(6</b>	_
Adequate provision has been made for the contribution of the contr	uted among its member	rs in accordance with	their respectiv	
gnatures of the members having the same percentage of	f membership interests	necessary to approve	the dissolution	n:
Signature		Printed Name		
ad Marthare	A	adearon	Happ	يع
•	<del></del>			_
	-			_