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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. SAULSBERRY EXAMINER

APR 4 2011

## **COVER LETTER**

	egistration Section livision of Corporations					
SUBJECT	CYPRESS MANAGEMENT GROUP LLC					
	(Name of Limited Liability Company)					
The enclose	ed Articles of Dissolution and fee(s) are submitted for filing.					
Please retur	rn all correspondence concerning this matter to the following:	2011 SEC				
	Toursty Choth	MAR 31 AI				
	(Name of Person)	MAR 31 AM II: 18 SECRETARY OF STATE ALLAHASSEE, FLORIDA				
	(Firm/Company)					
	(Address)	<b>\overline{\overline{\pi}}</b>				
		<del></del>				
	Nemer 6 33468-1839					
	(City/State and Zip Code)	**************************************				
For further i	information concerning this matter, please call:					
	nwonty Crotty at (561) 670.7	963				
	(Name of Person) (Area Code & Daytime Telepho	one Number)				
Enclosed is a	a check for the following amount:					
\$25.00 Fiii	Certificate of Status Certified Copy Certi (additional copy is enclosed) Certi	60.00 Filing Fee, ficate of Status & fied Copy itional copy is enclosed)				
	Registration Section  Division of Corporations  P.O. Box 6327  Registration Section  Division of Corporatio  Clifton Building	Division of Corporations				
	Tallahassee, FL 32314 2661 Executive Center	Circle				

Tallahassee, FL 32301

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

A LIMITED I	LIABILITY COM	IPANY	2011 TAL SE
1. The name of a limited liability company is	roll, uc		HAR 31 F
2. The Articles of Organization were filed on	128 08	and assi	igned Socument numbe
3. The date the dissolution was approved: $\frac{g}{}$	31/10	<u>.</u>	
4. A description of occurrence that resulted in the 1 608.441, Florida Statutes, (copy 608.441 on bac	limited liability com k cover letter). Gw(RM)	pany's dissolution p	oursuant to section
ME WERE A NOW ROEMENT	A resolt	COULD NAT	CHUHOE
TO OPERATE.			
Adequate provision has been made for to a control of the control o	tributed among its more of an any court of any court	t. y judgment, order o	ce with their respective
Signature		Printed N	Name
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**FILING FEE: \$25.00**