LO'SOOGATYZY

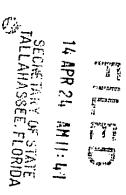
(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
, , ,						
PICK-UP WAIT MAIL						
 -						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						
Special instructions to Filing Officer.						

Office Use Only



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04/24/14--01015--014: **25.00- -/:



'ACOVER LETTER

	stration Section ion of Corporations	•	
SUBJECT: _	LIGHT SOURCE SO	ed Liability Company)	-
The enclosed A	Articles of Dissolution and fee(s) are submit	ted for filing.	
	all correspondence concerning this matter to	•	
	Luis Se	50-10	
	(Nar	ne of Person)	
	(Fin	m/Company)	
	11806 TANGLE	WEED WAY	
	GIBSON HOW FZ	(Address) 2, 33534 ate and Zip Code)	
For further inf	formation concerning this matter, please call.	:	
	Luis soto (Name of Person)	at (2/0) 473-757/ (Area Code & Daytime Telephone Number)	_
Enclosed is a ch	heck for the following amount:		
\$25.0	00 Filing Fee and Certificate of Dissolution	S55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)	ensagnar F. E. E. D
	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registration Section Division of Corporations Clifton Building 2661 Executive Center Carle Tallahassee, FL 32301	Transport

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liability company is LIGHT SOURCE SOLUTIONS						
2.	The Articles of Organization	were filed on	5/2008	and assigned			
	document number 900	0413968	(FEI)				
3.	The delayed effective date the dissolution if not effective on the date of filing: (effective date cannot be prior to or more than 90 days later than date document is received for filing)						
4.				ny's dissolution pursuant to section			
	No longer	operatives th	le business				
			-1				
5.	If there are no members, entractivities and affairs:	er the name and add	lress of the person appo	inted to wind up the company's			
							
6. lis	Signature of an authorized p sted above to wind up the con	erson or if there are apany's activities an	no members, the signa	ture of the person appointed and			
	7		<u> </u>	is 50+10			
Signature			Printed Name				

FILING FEE: \$25.00