L08000111374

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

Office Use Only



000174116610

04/05/10--01020--004 **25.00

10 APR -5 PH 1: 31
SECRETARY OF STATE

S. HAWKES

APR 6 2010

EXAMINER

COVER LETTER

~ •
G
22
<i>ا</i> ل د

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 The name of a limited liability company is and assigned document number 2. The Articles of Organization were filed on 3. The date the dissolution was approved: 4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 608.441, Florida Statutes, (copy 608.441 on back cover letter). All debts, obligations and liabilities of the limited liability company have been paid or discharged. Adequate provision has been made for the debts, obligations and liabilities pursuant to s. 608.4421. 6. All remaining property and assets have been distributed among its members in accordance with their respective rights and interests. There are no suits pending against the company in any court. Adequate provision has been made for the satisfaction of any judgment, order or decree which may be entered against it in any pending suit. Signatures of the members having the same percentage of membership interests necessary to approve the dissolution: Printed Name

5. CHECK ONE:

7. CHECK ONE:

ignature

FILING FEE: \$25.00