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SEGRETAR OF STATE DIVISION OF CORPORATIONS

T. HAMPTON

MAR 1 1 2010

EXAMINER



COVER LETTER

SUBJECT: Breakaway Solutions (Name of L	imited Liability Company)
(Name of L	imited Liability Company)
	, , ,
The enclosed Articles of Dissolution and fee(s) are sub-	bmitted for filing.
Please return all correspondence concerning this matter	er to the following:
Hoda Noufal	
	(Name of Person)
Breakaway Solutions	S
	(Firm/Company)
P.O. Box 1514	
	(Address)
Fort Lauderdale, FL	33302
(City	/State and Zip Code)
For further information concerning this matter, please	call:
Hoda Noufal	_{at (} 954 ₎ 682-0842
(Name of Person)	(Area Code & Daytime Telephone Number)

\$55.00 Filing Fee &

(additional copy is enclosed)

Certified Copy

MAILING ADDRESS:

\$25.00 Filing Fee

30.00 Filing Fee & Certificate of Status

Registration Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

\$60.00 Filing Fee,

Certificate of Status &

(additional copy is enclosed)

Certified Copy

Registration Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY



10 MAR TO PM 4: 14

1. The name of a limited liability company is Breakaway Solutions LLC		
2. The Articles of Organization were filed on L09000002229	27/2009 and assigned document number	
 3. The date the dissolution was approved:		
5. CHECK ONE:		
-OR-	e limited liability company have been paid or discharged. e debts, obligations and liabilities pursuant to s. 608.4421.	
<u> </u>	buted among its members in accordance with their respective	
7. CHECK ONE:		
There are no suits pending against the con-OR-		
iAdequate provision has been made for the entered against it in any pending suit.	e satisfaction of any judgment, order or decree which may be	
signatures of the members having the same percentage of	of membership interests necessary to approve the dissolution:	
Signature	Printed Name	
Hibulal	Hoda Noufal	