L0900008045

| (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: | | |
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Office Use Only



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08/09/10--01049--007 **25.00

FILED

10 AUG -9 PM 12: 27

SECVETARY OF STATE
SECVETARY OF FLORIDA

COVER LETTER

| TO: Registration Section Division of Corporations | | |
|---|--|--|
| SUBJECT: BROWKED TOWING & RECOVERY LLC (Name of Limited Liability Company) | | |
| (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: | | |
| | | |
| KEITH HOLLMAN (Name of Person) | | |
| | | |
| Broward Towing and Recovery, LLC | | |
| (Firm/Company) | | |
| 1326 SE 17th Street #250 | | |
| (Address) | | |
| Ft. Lauderdale, FL-33316 | | |
| (City/State and Zip Code) | | |
| For further information concerning this matter, please call: | | |
| Keith Hickman at 954 865-6563 (Name of Person) (Area Code & Daytime Telephone Number) | | |
| | | |
| Enclosed is a check for the following amount: | | |
| \$25.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) S60.00 Filing Fee, 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

FILED

10 AUG -9 PM 12: 27

SECRETARY OF STATE

| 1. The name of a limited liability company is BROWARD TOWING A | ND RECOVERY, LLC |
|--|---|
| 2. The Articles of Organization were filed on 1 2 LOGOOVO 8045 | 3 2009 and assigned document number |
| 3. The date the dissolution was approved: 819 | · · · · · · · · · · · · · · · · · · · |
| 4. A description of occurrence that resulted in the limite 608.441, Florida Statutes, (copy 608.441 on back cov | er letter). |
| | b |
| 5. CHECK ONE: | |
| G-OR- | bts, obligations and liabilities pursuant to s. 608.4421. |
| 6. All remaining property and assets have been distribut rights and interests.7. CHECK ONE: | ed among its members in accordance with their respective |
| There are no suits pending against the compa | ny in any court. tisfaction 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 r | nembership interests necessary to approve the dissolution: |
| Signature | Printed Name |
| Kell | · KEITH Hickman |
| | |
| | |
| | #\ |