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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : HAHN LOESER & PARKS

Account Number : 120070000069 Phone : (239)254-2924

Fax Number : (239)254-2945

LLC DISSOLUTION OR WITHDRAWAL JHC MANAGEMENT CONSULTANTS LLC

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COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT:

JHC Management Consultants LLC

(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:

Curtis B. Cassner

(Name of Person)

Hahn Loeser & Parks, LLP

(Firm/Company)

5811 Pelican Bay Blvd. #650

(Address)

Naples, FL 34108

(City/State and Zip Code)

For further information concerning this matter, please call:

Curtis B. Cassner

(Name of Person)

239 \ 552-2962

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

\$25.00 Filing Fee and Certificate of Dissolution

□ \$55.00 Filing Fee, Certificate of Dissolution & 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

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ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liability company is				
	JHC Management Consultants LLC		*		
2.	The Articles of Organization were filed on April 27, 200	09a	nd assigned		
	document number 1.09000017391				
3.	(effective date cannot be prior to or more the	ctive 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) inserted in this block does not meet the applicable statutory filing requirements, this date will not be ment's effective date on the Department of State's records.			
4.	A description of occurrence that resulted in the limited 605.0707, Florida Statutes, (copy 605.0707 on back cov	liability company's disso er letter).	dution pursuant to section		
	Termination of business activities and distribution of all asset		ger.		
	•		ب		
5.	If there are no members, enter the name and address of activities and affairs:	the person appointed to	wind up the company's		
6. lis	Signature of an authorized person or it there are no me ted above to wind up the company's activities and affai	inbers, the signature of thes:	e person appointed and		
		Curtis B. Cassner			
Signature		Printed Name			

FILING FEE: \$25.00