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(Requestor's Name)
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02/28/14--01029--008 **25.00



COVER LETTER: .



TO: Registration Section Division of Corporations

SUBJECT: 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:

(Pirm/Company)

(Pirm/Company)

2327 MINGLETON AJE.

(Address)

WINTER PARK FL 32797

(City/State and Zip Code)

For further information concerning this matter, please call:

MELINDA GIERDA at (407) Not 9076

(Name of Person)

(Area Code & Daytime Telephone Num

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

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liabili	
2. The Articles of Organization document number	were filed on $\frac{4 2 2009}{964532188}$ and assigned
3. The delayed effective date the	ne dissolution if not effective on the date of filing:
	that resulted in the limited liability company's dissolution pursuant to section copy 605.0707 on back cover letter).
5. If there are no members, ent activities and affairs:	er the name and address of the person appointed to wind up the company's MELINDA TOS FIORDANO 2727 Middleton Au Winter Park F1 72797
6. Signature of an authorized p above to wind up the company	erson or if there are no members, the signature of the person appointed and listed s activities and affairs:
Signature	Printed Name
1	FILING FEE: \$25.00
	ALLANDA 20