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(Re	questor's Name)			
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(Business Entity Name)				
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Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
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COVER LETTER

TO:

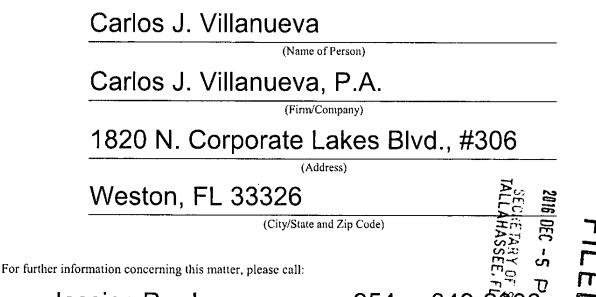
Registration Section Division of Corporations

Siramall, 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:



Jessica Perdomo

(Name of Person)

(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

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liability company is Siramall, LLC			
2.	The Articles of Organizatio	n were filed on 04/08/2009	and assigned	
	document number L090000	4470		
3.	(effective Note: If the date inserted in t	ffective 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) ate inserted in this block does not meet the applicable statutory filing requirements, this date will not be cument's effective date on the Department of State's records.		
4.	A description of occurrence 605.0707, Florida Statutes, (that resulted in the limited liability company's discopy 605.0707 on back cover letter).	solution pursuant to section	
LLC is a real estate holding company. Property has been sold and LLC no longer has any business operations.				
5.	If there are no members, enactivities and affairs:	ter the name and address of the person appointed to Carlos J. Villanueva	wind up the company's	
1820 N. Corporate Lakes Blvd., #306				
		Weston, FL 33326	2018 TALL	
			DEC PETAL	
6. lis	Signature of an authorized parties above to wind up the cor	person or if there are no members, the signature of the s	the person appointed and	
	Claustin	Carlos J. Villanueva		
	Signature	Printed 1	name	

FILING FEE: \$25.00