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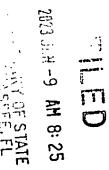
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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: AUGUSTA MANAGEMENT, 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:		
GALEN J. YODER		
(Name of Person)		
(Firm/Company)		
805 AUGUSTA DRIVE		
Lititz PA. 17543 (City/State and Zip Code)		
(Citý/State and Zip Code)		
For further information concerning this matter, please call:		
GALEN J. YOUER	at (717) 341-9795 (Area Code & Daytime Telephone Number)	
(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: Pagistration Soution	Street Address:	
Registration Section Division of Corporations	Registration Section Division of Corporations	
P.O. Box 6327	The Centre of Tallahassee	
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF DISSOLUTION FOR -A LIMITED LIABILITY COMPANY

FILED