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(City/State/Zip/Phone #)		
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(Document Number)		
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COVER LETTER

	istration Section ision of Corporations
SUBJECT:	ACCOUNTING MANAGEMENT SERVICES OF CENTRAL FL. 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:
	JOSE S RAMOS, TRUSTEE
	(Name of Person)
	ACCOUNTING MANAGEMENT SERVICES OF CENTRAL FL.LLC
	(Firm/Company)
	2344 CRESTOVER LANE
	(Address)
	WESLEY CHAPEL, FL. 33544
	(City/State and Zip Code)
For further in	formation concerning this matter, please call:
JC	SE S RAMOS-TRUSTEE at 813 486-4459
	(Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a	check for the following amount:
\$25.00 Filir	ag Fee

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

(additional copy is enclosed)

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

2. The Articles of Organization were filed on L09000065757 3. The date the dissolution was approved: (05/31/2011 4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 608.441, Florida Statutes, (copy 608.441 on back cover letter). NO LONGER IN BUSINESS 5. CHECK ONE: All debts, obligations and liabilities of the limited liability company have been paid or discharged. OR. Adequate provision has been made for the debts, obligations and liabilities pursuant to s. 608.4421. 6. All remaining property and assets have been distributed among its members in accordance with their respective rights and interests. 7. CHECK ONE: Adequate provision has been made for the satisfaction of any judgment, order or decree which may be entered against it in any pending suit. Printed Name JOSE S RAMOS-TRUSTEE		T SERVICES OF CENTRAL FL.LLC
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