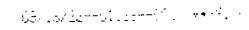
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Special Instructions to F	lling Officer:			

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COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: Cer 7ified Manufacturian &/ (Name of Limited	Liability Company)			
The enclosed Articles of Dissolution and fee(s) are submitted. Please return all correspondence concerning this matter to the	-			
John Bailie (Name of Person)				
Certified MANGFACTURING ENTERPRISES LCC (Firm/Company)				
651 BAILIE ROad (Address)				
Crestview, Fl. 3253 9 (City/State and Zip Code)				
For further information concerning this matter, please call: John Baile at (856) 951 2162 (Name of Person) (Area Code & Daytime Telephone Number)				
John Bailie (Name of Person)	at (<u>956</u>) <u>951 2162</u> (Area Code & Daytime Telephone Number)			
Enclosed is a check for the following amount:	F3	•		
\$25.00 Filing Fee and Certificate of Dissolution	S55.00 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 Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

i.	. The name of a limited liability co	ompany is
	CERTIFIES MANUFACTO	eing Enteafrisos LL C
2.	2. The Articles of Organization we	re filed on July 09, 2009 and assigned
	document number <u>Logodo</u>	56298
3.	Note: If the date inserted in this bl	essolution if not effective on the date of filing: 30 Sept 2022 cannot be prior to or more than 90 days later than date document is received for filing) ock does not meet the applicable statutory filing requirements, this date will not be late on the Department of State's records.
4.	A description of occurrence that 605,0707, Florida Statutes, (copy	resulted in the limited liability company's dissolution pursuant to section 605.0707 on back cover letter).
	BOTH PARTNES are O	US 70 years old And wish Tore 7: Re
5.	If there are no members, enter th	e name and address of the person appointed to wind up the company's
	activities and affairs:	John Bailie
		651 BAILLE ROAD Cristulew, 1=1,32535.
	_	- ; 5.2
	_	
6. ab	5. Signature of an authorized perso bove to wind up the company's act	n or if there are no members, the signature of the person appointed and listed ivities and affairs:
	Ook Back	John Bailie Printed Name
	Signature	Printed Name

FILING FEE: \$25.00

Notice of Limited Liability Company Dissolution

NOTE: This page is optional

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company: Certified MANUFACTURING ENTER MISES L
Document number of Limited Liability Company is: L 0900066298
Date of dissolution was: 30597 2022
Description of information that must be included in a written claim:
Ascumentation of CONTIONTS, OGSERNITS and purchase andres
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
583 ARMISTEAD BLVP,
S83 Armistead BLVP, . HOLT FL. 32564
A claim against the above named limited liability company will be barred unless a proceeding to enforce th claim is commenced within 4 years after the filing of this notice.
John Bailie O. Sail

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00

Signature of the Person Filing

Printed Name of the Person Filing