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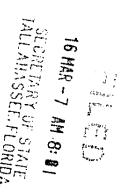
(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
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COVER LETTER

TO:	Registration Section Division of Corporations	• • • • • • • • • • • • • • • • • • •		
CUDII	FISHER CONSULTING GROUP,	LLC		
SUBJI	ECT:(Name of Limit	ed Liability Company)		
	recturn all correspondence concerning this matter to	_		
	LEONARD T. FISHER			
	(Nar	ne of Person)		
	(Fin	m/Company)		
	922 SHELLBARK WAY			
	THE VILLAGES, FL 32162	(Address) THE VILLAGES, FL 32162		
	(City/Sta	ate and Zip Code)		
For fur	ther information concerning this matter, please call:			
	LEONARD T. FISHER	352 633-9256 at ()		
	(Name of Person)	(Area Code & Daytime Telephone Number)		
Enclose	ed is a check for the following amount:			
í	■ \$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 FISHER CONSULTING GROUP, LLC
2.	The Articles of Organization were filed on and assigned
	document number
3.	The delayed effective 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) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
4.	A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707, Florida Statutes, (copy 605.0707 on back cover letter). BUSINESS DISCONTINUED
	If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:
6. Iis	Signature of an authorized person or if there are no members, the signature of the person appointed and ed above to wind up the company's activities and affairs:
	JANET C. FISHER Signature Printed Name

FILING FEE: \$25.00