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(Address)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
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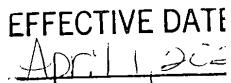
Tallahassee, FL 32314

TO: Registration Section Division of Corporations					
SUBJECT: JYJ KOS LUC (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:					
Robin Jung (Name of Person)					
TYT KOS UC (Firm/Company)					
6382 5th Ave North					
ST Petersburg FL 33710 (City/State and Zip Code)					
For further information concerning this matter, please call:					
Robin Juny at 727 482-3696 (Area Code & Daytime Telephone Number)					
Enclosed is a check for the following amount: \$\sum_{\text{\$525.00}} \text{Filing Fee and Certificate of Dissolution} \text{\$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)}					
Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of Tallahassee					

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY



		/ .\ 		
1.	The name of a limited liability company is		,	
	IXI KOS, WC	·		
2.		and assigned		
	document number <u>L / 00000 2 34 3 7</u>			
3.	The delayed effective date the dissolution if not effective on the date of filing:			t be
4.	A description of occurrence that resulted in the limited liability company's disso 605,0707, Florida Statutes, (copy 605,0707 on back cover letter).	lution pursuant to	section	n
	Consent of all the newlock			
		<u> </u>	202	
		= 7		<u></u>
5.	If there are no members, enter the name and address of the person appointed to v	vind up the compa	ယု any s	
	activities and affairs:		<u>*</u>	
	Robin Jung	- : , . -): 10	
	6382 5th Aux Mirth	2		
	St Petrosbuy, FL 333	710		
6. ab	Signature of an authorized person or if there are no members, the signature of the ove to wind up the company's activities and affairs:	e person appointe	d and li	isted
1	Acisen Reinsted Na	Tury ame		
	FILING FEE: \$25.00	7		