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EXAMINER



300199188013

04/13/11--01008--014 **25.00

II APR 13 PH 12: 43
SECRETARY OF STATE
TALL AHASSEF FLORING

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: OH CODE (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:
Javal. Wiclesier (Name of Person)
JOYA FOOT WOUG (Firm/Company)
4205 79 h St. JW. (Address)
CerriGH ACLOS-SI 33977C (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at (229) 44.3269 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, Certificate of Status & 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	
JOTA FOOT WOLLS, CLC	•
2. The Articles of Organization were filed on 4	and assigned document number
3. The date the dissolution was approved: 32	3/10
4. A description of occurrence that resulted in the li	imited liability company's dissolution pursuant to section cover letter).
NO MOTE tunds to in	Nest- filing personal bank.
OUL OF Bysmiss	
5. CHECK ONE:	
G-OR-	he limited liability company have been paid or discharged.
_ · ·	he debts, obligations and liabilities pursuant to s. 608.4421.
 All remaining property and assets have been disti rights and interests. 	ributed among its members in accordance with their respective
7. CHECK ONE:	
There are no suits pending against the co	ompany in any court.
	he satisfaction of any judgment, order or decree which may be
Signatures of the members having the same percentage	e of membership interests necessary to approve the dissolution:
Signature	Printed Name
Sarce & Widesser	Taka L Widegrer TARY OF PH
	ARGAN SS
	ORIDA RIDA
	5

FILING FEE: \$25.00