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	(Requestor's Name)
	(Address)
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PICK-U	P WAIT MAIL
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TO DOT -4 PH 12: 05

SECRETARY OF STATE
ARRAMANAMENT OF STATE

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: GREEN HILLS KAFE, 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:			
ADDA CHYNCES			
(Name of Person)			
(Firm/Company)			
10425 SW 97TH COURT			
(Address) MIAMI FL 33176			
(City/State and Zip Code)			
For further information concerning this matter, please call:			
ADDA CHYNCES at (305) 598-6000 (Area Code & Daytime Telephone Number)			
(Name of Person) (Area Code & Daytime Telephone Number)			
Enclosed is a check for the following amount:			
\$25.00 Filing Fee 30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) (additional copy is enclosed) \$60.00 Filing Fee, 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 GREEN HILLS KAFE, LLC	
2. The Articles of Organization were filed on	JUNE 17, 2010 and assigned document number
3. The date the dissolution was approved:	10/4/10
4. A description of occurrence that resulted in the 608.441, Florida Statutes, (copy 608.441 on the MUTUAL CONSENT	he limited liability company's dissolution pursuant to section back cover letter).
-OR-Adequate provision has been made for Adequate provision has been made for a contract of the contract of th	or the satisfaction of any judgment, order or decree which may be
Signature Signature	tage of membership interests necessary to approve the dissolution: Printed Name
(hyures)	ADDA CHYNCES
	LAWRENCE CHYNCES
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FILING FEE: \$25.00