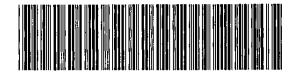
L11000/44/a52

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
A. LUNT		
JUL9 2011		
EXAMINER		

Office Use Only



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07/10/12--01002--002 **25.00

SECRETARY OF STATE

DR JUH 28 PH 3 QU

FILED

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: FMN Extermine 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:	
Joyce Nascinento	
(Firm/Company) 5554 Metworest Blud#106 For Address) Orlando FL 3284 (City/State and Zip Code)	
For further information concerning this matter, please call:	
(Name of Person) at () (Area Code & Daytime Telephone Number)	-
Enclosed is a check for the following amount: \$25.00 Filing Fee \$ Certificate of Status \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, Certified Copy (additional copy is enclosed)	losed)

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	
FMN ENT	ERPRISE LLCER B
2. The Articles of Organization were filed on 12 L11000144252	127/2011 and assigned abstiment number
	<u> </u>
4. A description of occurrence that resulted in the limite 608.441, Florida Statutes, (copy 608.441 on back cov	ed hability company's dissolution pursuant to section ver letter).
Didult mal	Re any money
5. CHECK ONE:	
-OR-	mited liability company have been paid or discharged. ebts, obligations and liabilities pursuant to s. 608.4421.
_ ' '	ited among its members in accordance with their respective
rights and interests.	
7. CHECK ONE:	
There are no suits pending against the compa-OR-	·
entered against it in any pending suit.	atisfaction of any judgment, order or decree which may be
anatures of the members having the same percentage of	membership interests necessary to approve the dissolution:
Signature	Printed Name
FERNANDA NEGROMONTS	Jeruands Negromor

FILING FEE: \$25.00