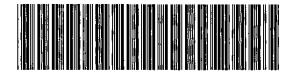
L12000017594

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



400241693654

11/13/12--01005--025 **25.00

ZOIZ NOV 13 AM 8: 13
SECRETARY OF STATE
SECRETARY OF STATE

J. BRYAN

NOV 1 4 2012

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: AA-HOSPITALIY LLC (Name of Limited Liability Company) 703-615-2454
The enclosed Articles of Dissolution and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
The enclosed Articles of Dissolution and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Tufail MITTA (Name of Person) AA Hospitality LLC (Firm/Company)
4509 Mosser Mill Court
Woodbridge Va 22192 (City/State and Zip Code)
For further information concerning this matter, please call:
Tufail Mirza at (703) 615-2454 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee Certificate of Status Certificate of Status & Certificate of Status & Certificate of Status & Certificate Opy (additional copy is enclosed)
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is

2. The Articles of Organization were filed on _

3. The date the dissolution was approved:

5. CHECK ONE:

rights and interests.

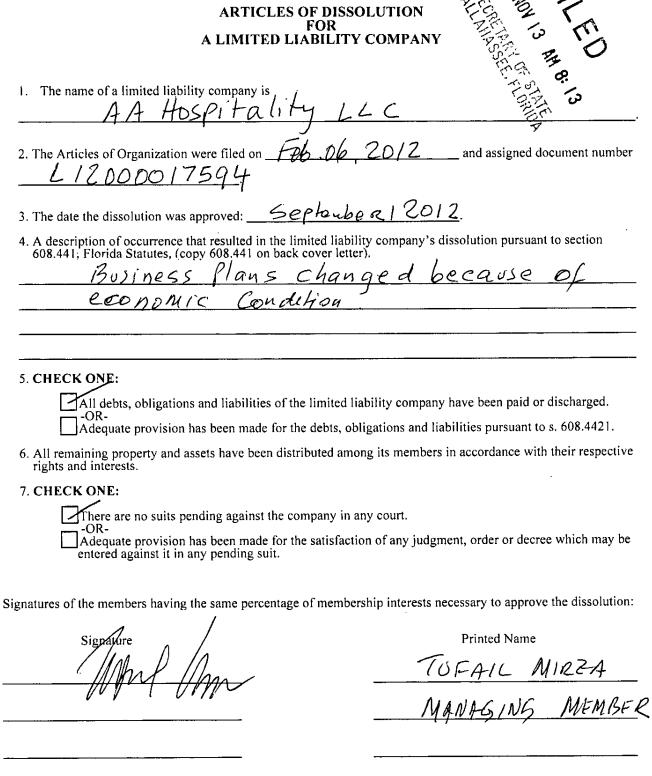
7. CHECK ONE:

608.441; Florida Statutes, (copy 608.441 on back cover letter).

Business Plans changed

There are no suits pending against the company in any court.

entered against it in any pending suit.



7.12