

L120000021842

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

JAN 20 2015
J. BRUCE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AEROPHILE TENNESSEE, 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:

JAAFAR CHOUFANI

(Name of Person)

ALLEN, DYER, DOPPELT, MILBRATH & GILCHRIST, P.A.

(Firm/Company)

255 S. ORANGE AVENUE, SUITE 1401

(Address)

ORLANDO, FLORIDA 32801

(City/State and Zip Code)

For further information concerning this matter, please call:

JAAFAR CHOUFANI

(Name of Person)

at (407) 841-2330
(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

\$25.00 Filing Fee and Certificate of Dissolution

— \$55.00 Filing Fee, Certificate of Dissolution &
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

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**ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is
AEROPHILE TENNESSEE, LLC

2. The Articles of Organization were filed on FEBRUARY 14, 2012 and assigned
document number L12000021842

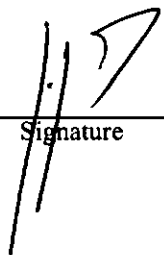
3. The delayed effective date the dissolution if not effective on the date of filing:
(effective date cannot be prior to or more than 90 days later than date document is received for filing)

4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).

Written consent of all of the members of Aerophile Tennessee, LLC to dissolve
the company.

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:

6. Signature of an authorized person or if there are no members, the signature of the person appointed and listed above to wind up the company's activities and affairs:


Signature

Jerome Giacomoni

Printed Name

FILING FEE: \$25.00

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TALLAHASSEE
FLORIDA

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