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COVER LETTER

TO:

Registration Section
Division of Corporations

DOMMERICH GROUP LLC

SUBJECT:

(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:

WILLIAM M. HURTER, ESQ.

(Name of Person)

HURTER & WILSON, P.A.

(Firm/Company)

2727 ULMERTON RD, SUITE 220

(Address)

CLEARWATER, FL 33762

(City/State and Zip Code)

For further information concerning this matter, please call:

WILLIAM M. HURTER, ESQ.

..727

317-0038

(Name of Person)

(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

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liability company is DOMMERICH GROUP, LLC			·		
2.	The Articles of Organization were filed on MARCH 26, 201	2	and assigned			
	document number L12000041234					
3.	The delayed effective date the dissolution if not effective or (effective date cannot be prior to or more than 9 Note: If the date inserted in this block does not meet the application listed as the document's effective date on the Department of States	tive 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) nserted in this block does not meet the applicable statutory filing requirements, this date will not be nent's effective date on the Department of State's records.				
4.	A description of occurrence that resulted in the limited liab 605.0707, Florida Statutes, (copy 605.0707 on back cover le DOMMERICH GROUP, LLC IS DISSOLVED EFFECTIVE AS	etter).	-	section		
	TO CONSENT OF ALL OF THE MEMBERS.					
				· 		
5.	If there are no members, enter the name and address of the activities and affairs:	person appointed to	wind up the compa	ny's		
						
6. lis	Signature of an authorized person or if there are no member ted above to wind up the company's activities and affairs:	rs, the signature of t	the person appointed	and		
•	Signature TYLI	ER MORE, MGRM	Vame FB	AND THE REAL PROPERTY.		
/	FILING FEE: \$2		ARY OF ASSET F			
	V		H: 31 STATE LORIC			