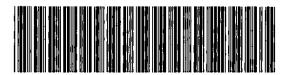
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COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: JMV LEGAL SERVICES, 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:
SULIE M. VOGEL (Name of Person)
(Name of Person)
JAN LEGAL SERVICES, LLC (Firm/Company)
PO BOX 415 (Address) MAGGIE VALLEY, NC 2875/ (City/State and Zin Code)
(Address)
MAGGIE VALLEY, NC 28751
(City/State and Zip Code)
For further information concerning this matter, please call:
JULIE M. VOGEL at 954 540-2088 A (Area Code & Daytime Telephone Number) (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 and Certificate of Dissolution S55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)
MAILING ADDRESS: STREET/COURIER ADDRESS:
Registration Section Registration Section
Division of Corporations Division of Corporations Division of Corporations
P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle
Tallahassee, FL 32314 2001 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

do 3. Ti D	he Articles of Organization ocument number	ne dissolution if not effidate cannot be prior to or me	ective on the date of the than 90 days later the applicable statutory	and assigned of filing: 4-15-	/7 for filing)
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00.	description of occurrence to 5.0707, Florida Statutes, (c	that resulted in the limicopy 605.0707 on back	ited liability compa cover letter).	ny's dissolution pursuan	t to section
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	there are no members, ente	er the name and address	s of the person appo	pinted to wind up the cor	mpany's
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6. Si listed	ignature of an authorized per fabove to wind up the com Mule 177. 7 Signature	pany's activities and a	ffairs:	ature of the person appoint	18 5 S
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