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COVER LETTER

TO:

Registration Section

Division of Corporations				
SUBJECT: Fifth Element Spiritual Awa	allering Center, LLC			
(Name of Limite	ed Liability Company)			
The enclosed Articles of Dissolution and fee(s) are submitted	ed for filing.			
Please return all correspondence concerning this matter to t	he following:			
James House	7			
James How	e of Person)			
N.				
HOLZ (Firm	Law n/Company)			
(
100 W Lucerne Circle	, # 200			
()	Address)			
ORLANDO, FL 3980 (City/Stat	0.1			
(City/Stat	e and Zip Code)			
For further information concerning this matter, please call:				
to ruther mornation concerning this matter, prease can.				
James Howz	at (407) 926 - 0232 (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	□ \$55.00 Filing Fee, Certificate of Dissolution &			
, , , , , , , , , , , , , , , , , , , ,	Certified Copy (additional copy is enclosed)			
MAILING ADDRESS:	STREET/COURIER ADDRESS:			
Registration Section				
Division of Corporations	Division of Corporations			
P.O. Box 6327	Clifton Building			
Tallahassee, FL 32314	ssee, FL 32314 2661 Executive Center Circle			

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

. The name of a limi	ted liability company	y is		
Fifth Ele	mat Spiritua	1 Awakening	Center, LLC	·
	ganization were filed			
document number	L130000 90516	<u> </u>		
Note: If the date in	(effective date cannot be	e prior to or more than t es not meet the applic	00 days later than date dable statutory filing re	ocument is received for filing) equirements, this date will no
A description of oc 605.0707, Florida S	currence that resulte	ed in the limited lial 707 on back cover	oility company's dis etter).	solution pursuant to section
Dinner is	Pursuinc ano	ther business.		
	0			
			<u> </u>	
				
. If there are no men	bers, enter the name	and address of the	person appointed t	o wind up the company's
activities and affair	rs: Ho	OLZ LAW		
	A#	n: 5th Elema	ŋ +	
	lad	III Lungen	Ciale Hans	
		W. Cocerne	Circle, #200)
	<u>Or</u>	ANDO, FL	32801	
. Signature of an aut sted above to wind u	horized person or if	there are no membe		the person appointed and
21. W	1	_		
WWU Sig	natur		Panela For	
O I S			1 1 1111000	- 1 IV

FILING FEE: \$25.00