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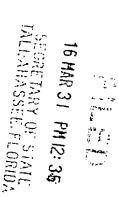
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APR 01 LUIG J SHIVERS

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Winter Crafdle Cide Lice (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:		
Stefanie Lolanson (Name of Person)		
(Firm/Company)		
ato werst flast street (Address)		
Wintel Charden FL. 34787 (City/State and Zip Code)		
For further information concerning this matter, please call:		
Stranie Lobinson at (407) USY-8400 (Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount: \$\sigma \frac{1}{3}\frac{1}{2}		

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
Winter Charden Guide
2. The Articles of Organization were filed on $\frac{9/20/26/3}{26/3}$ and assigned
document number <u>L130001382105</u>
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) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not listed as the document's effective date on the Department of State's records.
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).

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:
NSS 3
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:
A Hetanie Kobinsm
Signature Printed Name

FILING FEE: \$25.00