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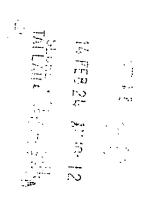
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COVER LETTER

TO:

Registration Section **Division of Corporations**

The enclosed Articles of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

VICTORIA L. BENDER

(Firm/Company)

2780 WILDERNESS ROAD
(Address)

WEST PALM BEACH, FL 33409
(City/State and Zip Code)

For further information concerning this matter, please call:

(Name of Person) at (561) 402 0067

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

\$25.00 Filing Fee

\$30.00 Filing Fee & Certificate of Status \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)

\$60.00 Filing Fee, Certificate of Status & 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

DETAILS IT LLC		
2. The Articles of Organization were filed on	and assigned document numbe	
 3. The date the dissolution was approved: 2/17/14 4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 608.441. Florida Statutes, (copy 608.441 on back cover letter). 		
5. CHECK ONE:		
All debts, obligations and liabilities of the limited liability comp-OR-Adequate provision has been made for the debts, obligations and		
6. All remaining property and assets have been distributed among its membrights and interests.	•	
7. CHECK ONE:	· · · · · · · · · · · · · · · · · · ·	
There are no suits pending against the company in any court.		
-OR- Adequate provision has been made for the satisfaction of any judentered against it in any pending suit.	dgment, order or decree which may be	
	in the state of th	
gnatures of the members having the same percentage of membership interest	s necessary to approve the dissolution	
Signature O	Printed Name	
Victma L. Bender VICT	ORIA L. BENDE	
(
	·	

FILING FEE: \$25.00