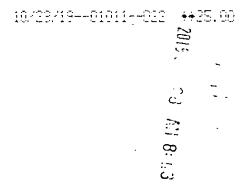
L1400000 9645

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT IN	MAIL
(Business Entity Name)	
(Document Number)	
,	
Certified Copies Certificates of Status	
Continue Copies	
Special Instructions to Filing Officer:	





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AND DISS

COVER LETTER

то:	Registration Section Division of Corporations
SUBJE	CT: OMCDO, UCC (Name of Limited Liability Company)
The end	closed Articles of Dissolution and fee(s) are submitted for filing.
Please :	eturn all correspondence concerning this matter to the following:
	Carolina Novonha Florida Prime Acquisitions, uc (Fine Company) GOO NW Lett St. # 201 FORT LAUDERDALD, FL. 33311
For furt	(City/State and Zip Code) ther information concerning this matter, please call:
	Carolina Noronha 991, 920-7500 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed	t is a check for the following amount: 425.00 Filing Fee and Certificate of Dissolution Certified Copy (additional copy is enclosed)

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

MAILING ADDRESS:

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
2. The Articles of Organization were filed on Olling and assigned
document number <u>L14000009</u> 645
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 be 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). BUSINESS NOS CEOSED OPERATIONS
Therefore no activity within
entity.
5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs: EVO Peretz
900 NW 10th St.
Suite 201
Fort Lauder Dale, FL 3831
6. Signature of an authorized person or if there are no members, the signature of the person appointed and listed above to kind up the company's activities and affairs:
Gienaure Frinted Name
Gighture Pfinted Name

FILING FEE: \$25.00