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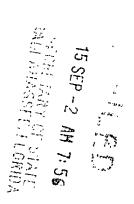
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Certified Copies	Certificates of S	tatus
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COVER LETTER .

TO: Registration Section Division of Corporations										
SUBJECT: PREMIER ASSET MANAGEMENT AND DEVELOPMENT LLC (Name of Limited Liability Company)										
(Name of Emmiss Emplify)										
The enclosed Articles of Dissolution and fee(s) are submitted for filing.										
Please return all correspondence concerning this matter to the following:										
VICTOR M. VERDI										
(Name of Person)										
VERDI ASSOCITAES GROUP, INC.										
(Firm/Company)										
312 E. VENICE AVENUE, SUITE 203										
(Address)										
VENICE, FLORIDA 34285										
(City/State and Zip Code)										
For further information concerning this matter, please call:										
VICTOR M. VERDI at (732) 829 8397										
(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 &										

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

Certified Copy (additional copy is enclosed)

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The nam	e of a limited liability	y company is							
	PREMIE	R ASSET M	ANAGEMEN'	r AND DEV	ELC	PMENT L	LC		- ' ,
2. The Artic	cles of Organization	were filed on	09/18/20)14		and assig	med		
documen	L14	000063603							
3. The dela	yed effective date the (effective date	dissolution if te cannot be prio	not effective r to or more than	on the date of 90 days later the	f filin In date	ng: 12-3	1-14 received f	or filing	5
4. A descrij 605.0707	ption of occurrence the following statutes, (co	nat resulted in opy 605.0707 (the limited lia on back cover	bility compar letter).	ny's o	dissolution p	oursuani	to sec	tion
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		,					· · · · · ·		-
									-
5. If there a	are no members, enter	the name and	address of th	e person appo	inted	l to wind up	the con	ipanyi	s
activities	s and affairs:	DENNIS	K. KNIPP	ER				35	- •1
		13914 1	MATANZAS	DRIVE			7557 7577	2-2	ر بر : ومنظ او
		FORT MI	EYERS, FL	ORIDA 33	905		- 17 37 - 17 37 - 17 37	M 7:	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1
							AUC.	<u>න</u> ධැ	·
6. Signature listed above	e of an authorized per to wind up the comp	rson or if there vany's activitie	e are no members and affairs:	ers, the signa	ture (of the person	ı appoii	ited an	d
	March L			DENNIC	к	KNIDDEL	2		
<i>J</i> ? /	Signature	m	DENNIS K. KNIPPER Printed Name						-

FILING FEE: \$25.00