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APR 01 2015 S. YOUNG

COVER LETTER

Division of Corporations
TRUSTED SURROGACY LLC SUBJECT:
SUBJECT: (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:
DIMITRIOS HATZIVLASSIOU
(Name of Person)
(Firm/Company)
16821 APOPKA SPRINGS BLVD
(Address)
MONTVERDE FL 34756
(City/State and Zip Code)
For further information concerning this matter, please call:
DIMITRIOS HATZIVLASSIOU 352 484-4395
DIMITINOS HATZIVEASSIOO 332 404-4393
(Name of Person) at ()
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:

TO:

Registration Section

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

l.	The name of a limited liabili TRUSTED SURROGA			
2.	The Articles of Organization	were filed on 9/25	/2014	and assigned
	document number <u>L14000</u>	133722		
3.	The delayed effective date the defective	ne dissolution if not e date cannot be prior to or t	ffective on the date of the more than 90 days later than	filing: 12/31/2014 date document is received for filing)
4.	A description of occurrence 605.0707, Florida Statutes, (o The LLC terminated on	• •		y's dissolution pursuant to section to fall members.
5.	If there are no members, ent activities and affairs:		•	nted to wind up the company's ANAGING MEMBER
6. Jis		person or if there are inpany's activities and	no members, the signat affairs:	ure of the person appointed and
	an			HATZIVLASSIOU
	Signature	FILING	Pi G FEE: \$25.00	TOTAL PROPERTY OF STATE OF STA