

**L95000000849**  
Division of Corp.  
P.O. Box 6327  
Tallahassee, FL.  
32314

Ralph Richardson  
P.O. Box 1284  
Gaines City, FL  
33845

3/30/98

To whom it may concern,

I am acknowledging your letter  
of 3/19/98 Letter # 398A00014778.

The proper forms and check are  
enclosed as per your request for  
the dissolution of R.T. Investments LC.

Thanks for your attention in this  
matter and being so helpful.

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-04/08/98--01003--001

\*\*\*\*\*61.25 \*\*\*\*\*61.25

**L95-849**

Name	<i>[Signature]</i>
Availability	<i>[Signature]</i>
Document Examiner	<i>[Signature]</i>
Updater	<i>[Signature]</i>
Updater Verifier	<i>[Signature]</i>
Acknowledgment	<i>[Signature]</i>
W. F. Verifier	<i>[Signature]</i>

Thanks  
*[Signature]*  
RALPH RICHARDSON

**ARTICLES OF DISSOLUTION  
FOR  
A FLORIDA LIMITED LIABILITY COMPANY**

FILED  
98 APR -7 PM 4:09  
SECTION 608.441  
FLORIDA

1. The name of the limited liability company is R.T. INVESTMENTS  
FEI # 59-3374245

2. The effective date of the limited liability company's dissolution is 1/31/97

3. A description of the occurrence that resulted in the limited liability company's dissolution pursuant to section 608.441, Florida Statutes, (copy of 608.441 on back of cover letter).

because of non use and by unanimous agreement  
of both parties.

4. CHECK ONE:

☒ All debts, obligations and liabilities of the limited liability company have been paid or discharged.  
-OR-

☐ Adequate provision has been made for the debts, obligations and liabilities pursuant to 608.4421.

5. All remaining property and assets have been distributed among its members in accordance with their respective rights and interests.


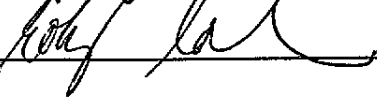
6. CHECK ONE:

☒ There are no suits pending against the company in any court.  
-OR-

☐ Adequate provision has been made for the satisfaction of any judgement, order or decree which may be entered against it in any pending suit.

Signatures of all members :

Signature

  
  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Typed or Printed name

RALPH RICHARDSON  
Bobby TALARICO  
\_\_\_\_\_  
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