L98000000113

3-1-99

I HAVE BEEN TRYING TO GET A

DISSOLUTION FORM SINCE DECEMBER OR

1998 I FINALLY GOT ONE ON FEBRUAR

1999.

900002800569--3 -03/10/99--01052--001 ******52.50 ******52.50

My PHONE NUMBER (904) 428-3793

ADDRESS

LEIAND WARMOTH 401 N. P. DE ST.

> NEW SMYRNA BEACH FC 32169

E110000008P-1

Name
Availability

Document
Examiner Duc

Updater Pcc

Ubdater
Verifyer CC

Acknowledgement DUC

W. P. Verifyer DUC

THANK YOU.

99 WAR 10 PH 2: 00
SECRETARY OF STATE
ALL ALLASSEE, FLORIDA

ARTICLES OF DISSOLUTION FOR A FLORIDA LIMITED LIABILITY COMPANY

1. The name of the limited liability company is L w management MAGEMENT		
2. The effective date of the limited liability com3. A description of the occurrence that resulted section 608.441, Florida Statutes, (copy	in the limited liability compa	my's dissolution pursuant to
OF ALL MEMBERS.	NANIMOUS WRITT	TEU AGREEMENT
 4. CHECK ONE: All debts, obligations and liabilities of the line-OR- Adequate provision has been made for the description. 5. All remaining property and assets have been respective rights and interests. 6. CHECK ONE: There are no suits pending against the compar-OR- Adequate provision has been made for the sat be entered against it in any pending suit. 	ebts, obligations and liabilities distributed among its member my in any court.	rs in accordance with their
Signatures of all members:		_
Signature Lelandedamoth	Typed or Printed name LEIAND WARMO	T14

Filing Fee: \$52.50