

L99 00000 6820

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

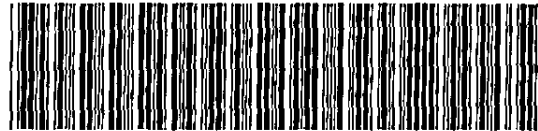
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



800051809328

04/27/05--01057--001 \*\*25.00

FILED  
MAY 27 11 1:50  
STATE  
MICHIGAN

A handwritten signature in black ink, appearing to be 'C. J. ...' with a flourish at the end.

**TRANSMITTAL LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** LOWAROUND Holdings LLC  
(Name of Limited Liability Company)

The enclosed Articles of Dissolution and fcc(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

MARK N. STROM  
(Name of Person)

\_\_\_\_\_  
(Firm/Company)

8221 MAIN Street  
(Address)

BOKEELIA FL 33922  
(City/State and Zip Code)

For further information concerning this matter, please call:

MARK N. STROM at ( 239 ) 283-3329  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- \$25.00 Filing Fee
- \$30.00 Filing Fee & Certificate of Status
- \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

**STREET ADDRESS:**  
Registration Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, Florida 32399

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

STATE  
PAID  
FLORIDA

05 APR 27 PM 1:59

FILED

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

1. The name of the limited liability company is

Lionaround Holdings LLC

2. The date the dissolution was approved: 4/25/05

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).

LACK OF BUSINESS FUNDING TO CONTINUE  
operations

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 s. 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 judgment, order or decree which may be entered against it in any pending suit.

Signatures of the members having the same percentage of membership interests necessary to approve the dissolution :

Signature



Typed or Printed name

MARK N. STROM

FILED  
05 APR 27 PM 1:56  
STATE OF FLORIDA  
CLERK OF THE CIRCUIT