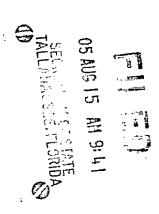
## 19900000723.2

(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:				
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L99-7232 2824,535				
Office Use Only				



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## FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

August 5, 2005

JULIE WRIGHT 926 VERSAILLES CIRCLE MAITLAND, FL 32751

SUBJECT: WRIGHT DEVELOPMENT, L.L.C.

Ref. Number: L99000007232

We have received your document for WRIGHT DEVELOPMENT, L.L.C., however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$25.00.

The fee to file your limited liability company document is \$25. Please include an additional \$30 for each certified copy (optional) requested and an additional \$5 for each certificate of status (optional) requested.

There is a fee of \$25.00 due.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6890.

Jason Merrick Document Specialist Letter Number: 905A00050512 05 AM 9: 41

## TRANSMITTAL LETTER

	IICAN	MILLANDELLER		
TO: Registration S Division of Co	ection orporations			
SUBJECT: Wright D	evelopment, LLC		; <del></del> ;	
		Limited Liability Company)		
The enclosed Articles of	of Dissolution and fee(s) are sul	bmitted for filing.		
Please return all corresp	ondence concerning this matte	er to the following:		
Ju	ilie Wright			
_		(Name of Person)		, .
		(Firm/Company)		-
926 \/a	ersailles Circle			
320 10	ordanies Ondie	(Address)		٠
Moisi	and, FL 32751			
		ty/State and Zip Code)	<u> </u>	
For further information	concerning this matter, please	call:		
Julie Wright		at ( 407 ) 875-33	40	
<del> </del>	(Name of Person)	(Area Code & Daytime	Telephone Number)	
Enclosed is a check for the	following amount:		· e	
<b>Ø</b> \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certificate of Status & Accordance (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

## ARTICLES OF DISSOLUTION FOR A FLORIDA LIMITED LIABILITY COMPANY

1. The name of the limited liability company is	
Wright Development, LLC	
2. The date the dissolution was approved: June 1, 2005	
3. A description of the occurrence that resulted in the limited section 608.441, Florida Statutes, (copy of 608.441 on ba	
A written consent of all members to dissolve LLC.	
<ul> <li>4. CHECK ONE:</li> <li>All debts, obligations and liabilities of the limited liability -OR-</li> <li>Adequate provision has been made for the debts, obligations.</li> <li>5. All remaining property and assets have been distributed a respective rights and interests.</li> <li>6. CHECK ONE:</li> <li>There are no suits pending against the company in any coron-OR-</li> <li>Adequate provision has been made for the satisfaction of be entered against it in any pending suit.</li> <li>Signatures of the members having the same percentage of the dissolution:</li> </ul>	mong its members in accordance with their urt.  any judgment, order or decree which may
Signature \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Typed or Printed name e S. Wright