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COVER LETTER

'TO: Amendment Section

Division of Corporations
SUBJECT: KLL ENTERPRISES, INC.
DOCUMENT NUMBER: P04000091645
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
MANA A. ENGSTROM (Name of Contact Person)
KLL ENTERPRISES TAK. (Firm/Company)
(Firm/Company)
38 RICHMOND DRIJE (Address)
(Address)
NETH CMURNA REACH F1 32-169
NEW SMYRNA BEACH FC. 32-169 (City/State and Zip Code)
For further information concerning this matter, please call:
DAVID R. BANSAND at (386) 774-8080 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$\text{\$\sum_\$\$43.75 Filing Fee & \$\text{\$\sum_\$\$\$43.75 Filing Fee & \$\text{\$\sum_\$\$\$Certificate of Status & \$\text{\$\cent{Certified Copy} is enclosed)}}\$ \$\$\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_\sum_{\sum_{\sum_{\sum_{\sum_{\sym_{\sym_{\sym\s\s\s\sum_{\sum_{\
MAILING ADDRESS: STREET ADDRESS:
Amendment Section Amendment Section Division of Corporations Division of Corporations
Division of Corporations P.O. Box 6327 Clifton Building
Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles FIRST: The name of the corporation as currently filed with the Florida Department of State: 'LL ENTERPRISES INC The document number of the corporation (if known): 1040009(645 SECOND: The date dissolution was authorized: DECEMBER 15 2006 THIRD: Effective date of dissolution if applicable: FOURTH: Adoption of Dissolution (CHECK ONE) Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval. Dissolution was approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve: The number of votes cast for dissolution was sufficient for approval by (voting group) Signature: (By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary) (Typed or printed name of person signing)

Filing Fee: \$35