## P06000076340

| (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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| ·                                       |
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SECRETARY OF STATE
TALLAHASSEE, FLORID,

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## **COVER LETTER**

| TO: Amendment Section Division of Corporations  |  |  |
|---|--|--|
| SUBJECT: LORPORAT DUSSOLUTION   |  |  |
| $\cdot$ .   |  |  |
| DOCUMENT NUMBER:  |  |  |
| The enclosed Articles of Dissolution and fee are submitted for filing.  |  |  |
| Please return all correspondence concerning this matter to the following:   |  |  |
| (Name of Contact Person)  |  |  |
| (Name of Contact Person)  |  |  |
| CEM STATION, INC.   |  |  |
| (Firm/Company)  |  |  |
| (Firm/Company)  12305 SOUTH DIVID HICHWAY  (Address)  |  |  |
| (Address)   |  |  |
|   |  |  |
| Miami FL 33156-5237 (City/State and Zip Code)   |  |  |
| For further information concerning this matter, please call:  |  |  |
| (Name of Contact Person) at (305) 255-4145  (Area Code & Daytime Telephone Number)  |  |  |
| (Name of Contact Person) (Area Code & Daytime Telephone Number)   |  |  |
| Enclosed is a check for the following amount:   |  |  |
| \$35 Filing Fee \$\bigcup \\$43.75 Filing Fee & \$\bigcup \\$43.75 Filing Fee & \$\bigcup \\$52.50 Filing Fee, Certificate of Status & Certificate of Status & Certified Copy (Additional copy is enclosed) (Additional copy is enclosed) |  |  |
| MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle   |  |  |

Tallahassee, FL 32301

## ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

| FIRST:  | The name of the corporation as currently filed with the Florida Department of State:  |
|---------|---|
|         | LLM STATION INC.  |
| SECOND  | The document number of the corporation (if known): PO60000 76340  |
| THIRD:  | The date dissolution was authorized:  |
| •       | Effective date of dissolution if applicable: (no more than 90 days after dissolution file date)   |
| FOURTH: | Adoption of Dissolution (CHECK ONE)   |
|         | Dissolution was approved by the shareholders. The number of votes case dendisselution was sufficient for approval.  |
|         | Dissolution was approved by the shareholders through voting groups.   |
|         | The following statement must be separately provided for each voting group expled to vote separately on the plan to dissolve:  |
|         | The number of votes cast for dissolution was sufficient for approval by   |
|         |   |
|         | (voting group)  |
|         |   |
|         | Signature: Outli ci dell  |
|         | (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) |
|         | LARLOS FONTECILLA   |
|         | (Typed or printed name of person signing)   |
|         | PRESIDENT   |
|         | (Title of person signing)   |