

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: _____
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Statement of Abandonment of Merger and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Name of Person

Firm/Company

Address

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

_____ at (_____) _____
Name of Person Area Code Daytime Telephone Number

STREET/COURIER ADDRESS:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

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

STATEMENT OF ABANDONMENT OF MERGER

Pursuant to section 605.1024(4), Florida Statutes, I hereby submit the following Statement of Abandonment of Merger prior to the effective date of the merger:

FIRST: The names of each party to the plan of merger:

SECOND: The date articles of merger the articles of merger were delivered for filing

is: _____

THIRD: The merger has been abandoned in accordance with 605.1024(4).

Authorized Representative

Typed or Printed Name of Signature

Signature of Authorized Representative

Typed or Printed Name of Signature

Filing Fee: \$25.00
Certified Copy: \$30.00 (optional)