

11/11/2014

2014-11-11 2:03:22 (GMT)

40765 010 From: Account Bookkeeping

L14000121061

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : ACCOUNT BOOKKEEPING CORP
Account Number : I20120000055
Phone : (407)898-1757
Fax Number : (407)897-5336

**LLC DISSOLUTION OR WITHDRAWAL
AS INTERIOR DESIGN LLC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

14 NOV 12 AM 7:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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14 NOV 12 AM 10:00

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NOV 13 2014

T. HAMPTON

2014-11-11 22:03:22 (GMT)

14076503010 From: Account Bookkeeping

H140002630423

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AS INTERIOR DESIGN LLC
(Name of Limited Liability Company)

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

Please return all correspondence concerning this matter to the following:

ANDREA PINE

(Name of Person)

ABK CORP

(Firm/Company)

3300 S HIAWASSEE RD STE 106

(Address)

ORLANDO, FL 32835

(City/State and Zip Code)

For further information concerning this matter, please call:

ANDREA PINE

(Name of Person)

407

898-1757

at (

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

✓ \$25.00 Filing Fee and Certificate of Dissolution

\$55.00 Filing Fee, Certificate of Dissolution &
Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

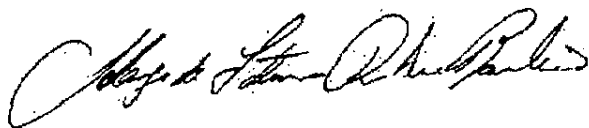
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H140002630423
ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is
AS INTERIOR DESIGN LLC
2. The Articles of Organization were filed on 08/01/2014 and assigned
document number L14000121061
3. The delayed effective date the dissolution if not effective on the date of filing:
(effective date cannot be prior to or more than 90 days later than date document is received for filing)
4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section
605.0707, Florida Statutes, (copy 605.0707 on back cover letter).
DISSOLUTION WAS APPROVED BY ALL THE MEMBERS
5. If there are no members, enter the name and address of the person appointed to wind up the company's
activities and affairs:
6. Signature of an authorized person or if there are no members, the signature of the person appointed and
listed above to wind up the company's activities and affairs:


Signature

ALCIONE DE SOUSA CABRAL
Printed Name



SOLANGE D. PINHEIRO BARRETO

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TALLAHASSEE, FLORIDA

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