03000044898

(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:

Office Use Only



700081240037

10/31/06--01069--003 **25.00

FILE OF STATENS CORPORATIONS OF OCT 31 PM 12: 33

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Sapient Group, 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:	
Neysan Movaffagh	e CNS.
(Name of Person)	ROCT ROCT
(Firm/Company)	ENSION OF CORPORATIONS ON OCT 31 PM 12:33
25583 E. Frost Place	新2.5
(Address)	33
Aurora, CO 80016	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
Neysan Movaffagh 303 , 400-9470	
(Name of Person) (Area Code & Daytime Telephone Number)	₹22 E
Enclosed is a check for the following amount:	
\$25.00 Filing Fee Certificate of Status S55.00 Filing Fee & Certificate of Status Certificate of Status (additional copy is enclosed) \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	sed)
MAILING ADDRESS: STREET/COURIER ADDRESS:	

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

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

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is		9 820
Sapient Group, LLC		2 002.
2. The Articles of Organization were filed on	17/2003 ar	nd assigned document number
3. The date the dissolution was approved: 10/5/200	06	
4. A description of occurrence that resulted in the limit 608.441, Florida Statutes, (copy 608.441 on back co The partnership is not conducting effective partnership effective partnership effective partnership effective partnership effective partnership effective partnership effective	ed liability company's dissoluter letter).	tion pursuant to section
life constraints and limitations. Also, the Flor	· · · · · · · · · · · · · · · · · · ·	
me constraints and intitiduoits. Also, the Figure	ida residenti member ne	io moved out of the otate.
· · · · · · · · · · · · · · · · · · ·		
5. CHECK ONE:		
All debts, obligations and liabilities of the li	mited liability company have	been paid or discharged
OR- Adequate provision has been made for the d	, ,	•
- · ·		_
All remaining property and assets have been distriburights and interests.	ted among its members in acc	ordance with their respective
7. CHECK ONE:		
There are no suits pending against the comp	any in any court.	
OR- Adequate provision has been made for the seen tered against it in any pending suit.	atisfaction of any judgment, c	rder or decree which may be
matures of the members having the same percentage of	membership interests necessa	ry to approve the dissolution:
Signature	. Pri	inted Name
Jahr Johnman.	John Falcor	ner
and a	Neysan Mov	vaffagh
CONTRACT OF THE PARTY OF THE PA		
	· · ·	<u> </u>
		٠.,

FILING FEE: \$25.00