105000071634

(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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S. HAWKES AUG 2 8 2009 EXAMINER

COVER LETTER

_		
STEFANIA A - BOOTH (Name of Person)		
_		
elosed)		

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

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is	
SAS DZIGN, LLC	
2. The Articles of Organization were filed on	and assigned document number
3. The date the dissolution was approved: 8-24-00	?
4. A description of occurrence that resulted in the limited liabi 608.441. Florida Statutes. (copy 608.441 on back cover letter)	lity company's dissolution pursuant to section er).
Reverted back to solepropriets	16 T
	7 PHI2: 07
5. CHECK ONE:	>
All debts, obligations and liabilities of the limited l -OR- Adequate provision has been made for the debts, ob	
 All remaining property and assets have been distributed amorights and interests. 	ong its members in accordance with their respective
7. CHECK ONE:	
There are no suits pending against the company in	any court.
OR- Adequate provision has been made for the satisfact entered against it in any pending suit.	•
Signatures of the members having the same percentage of membe	rship interests necessary to approve the dissolution:
Signature	Printed Name
Jeffoen O. Bood C	STEFANIA A. BOOTH