## 05000093797

| . (Requestor's Name)        |                 |                 |  |  |  |
|-----------------------------|-----------------|-----------------|--|--|--|
| (Address)                   |                 |                 |  |  |  |
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| (City/S                     | State/Zip/Phone | <del>; #)</del> |  |  |  |
| PICK-UP                     | ☐ WAIT          | MAIL            |  |  |  |
| (Busir                      | ness Entity Nam | ne)             |  |  |  |
| (Document Number)           |                 |                 |  |  |  |
| Certified Copies            | Certificates    | of Status       |  |  |  |
| Special Instructions to Fil | ing Officer.    |                 |  |  |  |
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SECRETARY OF STATE

7008 APR 22 AM III:

T. CLINE

APR 23 2008

**EXAMINER** 

## **COVER LETTER**

| то:     | Division     | ntion Section<br>of Corpor | rations                   |                         |                  |   |               |                 | •                      | (   |                      |           |
|---------|--------------|----------------------------|---------------------------|-------------------------|------------------|---|---------------|-----------------|------------------------|---|----------------------|-----------|
| SUBJE   | CCT:         | <u>SARA</u>                | 507A                      | (Name of Lir            | PA<br>mited Liab | <b>んて</b> が f<br>ility Comp                   | ecs<br>pany)  | 220             |                        | <b>Q</b> 22 )(  | <u>(uti</u>          | <b>ON</b> |
| The end | closed Art   | ticles of Di               | ssolution and             | fee(s) are sub          | mitted for       | filing.                                       |               |                 |                        |   |                      |           |
| Please  | return all   | correspond                 | lence concern             | ing this matter         | to the foll      | lowing:                                       |               |                 |                        |   |                      |           |
|         |              | =                          |                           | 2                       |                  |   |               |                 |                        |   |                      |           |
|         |              | SAR                        | CASOTA                    | BAY                     | Name of Pe       | RTNE<br>rson)                                 | RS.           | L               |                        |   |                      |           |
|         | ,            | <u>.</u>                   |                           | •                       | Firm/Comp        | •   |               |                 |                        |   |                      |           |
|         |              | <u> </u>                   | 301                       | NORTO                   | (Address         | M 1 A   | rm i          |                 | RAI                    | <u>_</u>  |                      |           |
|         |              | ·                          |                           | SARA<br>(City)          | State and 2      | A<br>Lip Code)                                | FC            | 34              | 123                    | SECRE<br>TALLAH   | 2008 APF             |           |
| For fur |              |                            | _                         | natter, please c        |                  | <b>~</b> .//                                  | /             | 21              | c/ 0                   | TARY OF<br>ASSEE, 19  | 2008 APR 22 AM II: 1 |           |
|         |              | > 4 W 0                    | Name of Perso             | MULCIN                  | a                | (Area   | )<br>Code & D | うり<br>aytime To | elephone               | Number D  |                      | T. mark   |
| Enclose | d is a checi | k for the fol              | lowing amount             | :                       |                  | ā   |               |                 |                        | ,,,_  |                      |           |
| \$25.0  | 0 Filing Fe  | ee                         | 30.00 Filir<br>Certificat | ng Fee &<br>e of Status | L Ce             | 00 Filing Fe<br>rtified Copy<br>Iditional cop | /             | sed)            | Certifica<br>Certified | 0 Filing Fee,<br>te of Status &<br>I Copy<br>nal copy is er |                      |           |
|         |              |                            | NG ADDR                   |                         |                  |   | REET/C        |                 |                        | DDRESS  | ;                    |           |

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   | •   |
|---|---|
| SARASOTA BAY CARTNERS   | <u> </u>  |
| 2. The Articles of Organization were filed on   | TEMBER 23, and assigned document number                     |
| L050000 93797.  | )   |
| 3. The date the dissolution was approved: 4   | <u>-08</u>  |
| <ol> <li>A description of occurrence that resulted in the limited I<br/>608.441, Florida Statutes, (copy 608.441 on back cover</li> </ol> | iability company's dissolution pursuant to section letter). |
| In accordance with its artic  | les in its operating orgreement                             |
| I a all assets have be  | feon distributed to its members an                          |
| Their are no remaining  | liabilities   |
|   | ALE 000   |
| 5. CHECK ONE:   | ARET APR  |
| All debts, obligations and liabilities of the limit   | ed liability company have been paid or discharged.          |
| -OP   | s, obligations and liabilities pursuant to \$ 608.421.      |
| 6. All remaining property and assets have been distributed  |   |
| rights and interests.   | ROF _   |
| 7. CHECK ONE:   | <b>,</b>  |
| There are no suits pending against the company  | in any court.   |
| Adequate provision has been made for the satist entered against it in any pending suit.   | faction of any judgment, order or decree which may be       |
| Signatures of the members having the same percentage of men   | mbership interests necessary to approve the dissolution     |
| organismes of the memoers having the same percentage of men   | moorship meeteste needssally to approve the dissertance     |
| Signature   | Printed Name  |
| Samuel Smellin  | SAW UEC SMULLIN   |
| •   |   |
| **************************************  |   |
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|   |   |
|   |   |

FILING FEE: \$25.00