

L060000 64226

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

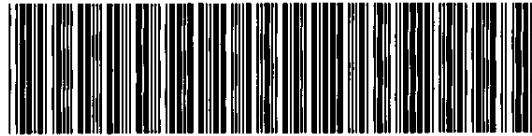
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FILED

2006 JUN 28 PM 3:05  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED

06 JUN 28 PM 12:50  
DEPT. OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 209852 7539870

AUTHORIZATION

COST LIMIT \$25.00

FILED  
2006 JUN 28 PM 3:05  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ORDER DATE : June 27, 2006

ORDER TIME : 10:19 AM

ORDER NO. : 209852-005

CUSTOMER NO: 7539870

DOMESTIC FILINGS

NAME: DTPSSG LLC

XX ARTICLES OF DISSOLUTION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX        PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Troy Todd - EXT# 2940

EXAMINER'S INITIALS: \_\_\_\_\_

**ARTICLES OF DISSOLUTION  
FOR  
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is

DTPSSG LLC

2. The Articles of Organization were filed on 06-26-2006 and assigned document number L06000064226

3. The date the dissolution was approved: 06-27-2006

4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to Section 608.441, Florida Statutes, (copy 608.441 on back cover letter).

**5. CHECK ONE:**

☒ All debts, obligations and liabilities of the limited liability company have been paid or discharged.

-OR-

☐ Adequate provision has been made for the debts, obligations and liabilities pursuant to s. 608.4421.

6. All remaining property and assets have been distributed among its members in accordance with their respective rights and interests.

**7. CHECK ONE:**

☒ There are no suits pending against the company in any court.

-OR-

☐ Adequate provision has been made for the satisfaction of any judgment, order or decree which may be entered against it in any pending suit.

Signatures of the members having the same percentage of membership interests necessary to approve the dissolution:

Signature

Printed Name

/s/John Jones

John Jones, Authorized Representative

**FILING FEE: \$25.00**