# 06000/2/135

(Re	equestor's Name)	
(Ad	ldress)	
(Address)		
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL .
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(Do	cument Number)	· · · · · · · · · · · · · · · · · · ·
Certified Copies	Certificates	ः s of.Status
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Special Instructions to	Filing Officer:	
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Office Use Only



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T. HAMPTON

NOV 2 0 2009

**EXAMINER** 

## **COVER LETTER**

Division of Corporations			
SUBJECT: Sapling TrusT 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:			
Wayne Ethridge (Name of Person)			
Sapling Trust LLC (Firm/Company)			
14125 Portrush Dr.			
Orlande, FL 32828 (City/State and Zip Code)			
For further information concerning this matter, please call:			
Wayne Ethridge at (407) 76/-4539 (Name of Person) (Area Code & Daytime Telephone Number)			
Enclosed is a check for the following amount:			
\$25.00 Filing Fee  Certificate of Status  Certificate of Status  Certificate of Status  Certified Copy (additional copy is enclosed)  (additional copy is enclosed)  (additional copy is enclosed)			

#### MAILING ADDRESS:

TO:

Registration Section

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



RECEIVED

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

November 3, 2009

WAYNE ETHRIDGE 14125 PORTRUSH DR ORLANDO, FL 32828

SUBJECT: SAPLING TRUST LLC Ref. Number: L06000121135

We have received your document for SAPLING TRUST LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Letter Number: 109A00034700

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

# ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY



1. The name of a limited liability company is  Sapling Trus'	T LLC
2. The Articles of Organization were filed on	1/1/2007 and assigned document number
3. The date the dissolution was approved://	/1/2009
4. A description of occurrence that resulted in the li 608.441, Florida Statutes, (copy 608.441 on back	mited liability company's dissolution pursuant to section cover letter).
Sapling Trust have de	cided to dissolve the
Company due to the la	ck of business due to the
current Real estate	market, Both President
Wayne Ethridge and Partr	ver Wendy Ethridge agreed to the
5. CHECK ONE:	dissolution
☐-OR-	ne limited liability company have been paid or discharged. ne debts, obligations and liabilities pursuant to s. 608.4421.
<del>_</del> · ·	ributed among its members in accordance with their respective
7. CHECK ONE:  There are no suits pending against the co	ompany in any court.
OR- Adequate provision has been made for the entered against it in any pending suit.	ne satisfaction of any judgment, order or decree which may be
Signatures of the members having the same percentage	of membership interests necessary to approve the dissolution:
Signature	Printed Name
Wayne Et lge	Wayne Ethridge
	Woudy E. Ethnidge