(Re	questor's Name)	
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(Cit	y/State/Zip/Phone	· #)
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Special Instructions to Filing Officer:		
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JUL 18 2008

EXAMINER



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07/17/08--01011--015 **25.00

08 JUL 17 PM 4: 15

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: STEPHW A PITTS 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:			
STEPHEN A PITS (Name of Person)			
STEPHEN A PITTS LLC (Firm/Company)			
1010 LAKE ROGERS BLUD (Address)			
OUIFOO FL 32765 (City/State and Zip Code)			
For further information concerning this matter, please call:			
STEPHEN A PITTS at (407) 718-0013 (Area Code & Daytime Telephone Number)			
Enclosed is a check for the following amount: \$25.00 Filing Fee \$ Certificate of Status \$55.00 Filing Fee & Certificate Of Status \$55.00 Filing Fee & Certificate Copy (additional copy is enclosed) \$60.00 Filing Fee, Certificate of Status & Certificate Copy (additional copy is enclosed)			

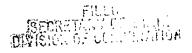
MAILING ADDRESS:

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 FILE SECRETALIAN SECRETAL



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I. The name of a limited liability company is	
STEPHEN A PITTS	"LLC"
	2-26-2007 and assigned document number
3. The date the dissolution was approved:	-15-2007
4. A description of occurrence that resulted in the limit 608.441, Florida Statutes, (copy 608.441 on back co	ted liability company's dissolution pursuant to section over letter).
NO WORK	
OR-Adequate provision has been made for the defendance of the defendance of the description of the descripti	satisfaction of any judgment, order or decree which may be
Signature	membership interests necessary to approve the dissolution: Printed Name
Style o Dae	STEPHEN A PITTS

FILING FEE: \$25.00