## 10000103197

(Re	equestor's Name)			
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	MAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificate	s of Status		
Special Instructions to Filing Officer:				

Office Use Only

G. MCLEOD

MAY - 4 2010

**EXAMINER** 



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04/30/10--01023--007 \*\*30.00

10 APR 30 PM 1: 5

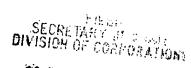
SECRETARY OF SOLIDAY

## **COVER LETTER**

	tration Section ion of Corporations			
SUBJECT:	D&S Business Solutions	, LLC.		
(Name of Limited Liability Company)				
The enclosed A	Articles of Dissolution and fee(s) are su	bmitted for filing.		
Please return a	Il correspondence concerning this matt	er to the following:		
	Deborah L. Smith			
	Deborari L. Simili	(Name of Person)		
	D00D : 01:			
	D&S Business Solutions, LLC.  (Firm/Company)			
		(Time Company)		
	2560 Mikler Road			
		(Address)		
	Oviedo, Fl. 32765			
	(Cit	y/State and Zip Code)		
For further info	ormation concerning this matter, please	call:		
Det	oorah L. Smith	at (_407	365-5224	
	(Name of Person)	(Area Code	& Daytime Telephone Number)	
Enclosed is a ch	eck for the following amount:			
\$25.00 Filing	Fee 30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is a	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registr Divisio Clifton	ET/COURIER ADDRESS: ation Section n of Corporations Building xecutive Center Circle	

Tallahassee, FL 32301

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY



10 APR 30 PH 1: 58

<ol> <li>The name of a limited liability company is D&amp;S Business Solutions, LLC.</li> </ol>	
2. The Articles of Organization were filed on 10/10/L07000103197	2007 and assigned document number
3. The date the dissolution was approved: 11/30/20	009
4. A description of occurrence that resulted in the limite 608.441, Florida Statutes, (copy 608.441 on back cov Very bad economy. NO Work.	
5. CHECK ONE:	
-OR-	mited liability company have been paid or discharged.  ebts, obligations and liabilities pursuant to s. 608.4421.
<del></del> , ,	ted among its members in accordance with their respective
7. CHECK ONE:	
There are no suits pending against the compa	any in any court.
	atisfaction 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
Mhorah L. Smith	Deborah L. Smith /Owner