108000080378

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

Office Use Only



900139357559

12/31/08--01039--015 **35.00

2009 JAN 14 AM 9: 40
SECRETARY OF STATE
SECRETARY OF STATE

T. CLINE

JAN 15 2009

EXAMMER



FLORIDA DEPARTMENT OF STATE Division of Corporations

January 5, 2009

NICHELLE SEGAR 5245 CINDERLANE PKWY APT 377 ORLANDO, FL 32808

SUBJECT: DOUGHSON, LLC Ref. Number: L08000080378

We have received your document for DOUGHSON, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days of your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline Regulatory Specialist II 100 JAN 14 AM 5: 45

Letter Number: 509A00000061

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



COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Oouah Son 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:
Nichelle Segar (Name of Person)
(Firm/Company) 5245 Cinderlane Plany Apt 37) (Address) Orlands FL 32808 (City/State and Zip Code) (Firm/Company) Apt 37) Apt 37) Apt 37) Apt 37) Orlands FL 32808
Orlando FL 32808 (City/State and Zip Code) (City/State and Zip Code)
For further information concerning this matter, please call:
Nichelle Segar at (618) 520-4131 (Name of Person) at (618) Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) Solve Filing Fee & Solve 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

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

1. The name of a limited liability company is		
Daughson L	LC	
2. The Articles of Organization were filed on	5/22/08	and assigned document number
 3. The date the dissolution was approved: 1 - C 4. A description of occurrence that resulted in the lin 608.441, Florida Statutes, (copy 608.441 on back) 	fl nited liability company's	dissolution pursuan Hossection
σ σ	cover letter).	AHAS
		SER
		EGF S. 9
		DR. F
		<u> </u>
5. CHECK ONE:		
All debts, obligations and liabilities of the		
Adequate provision has been made for the	e debts, obligations and li	abilities pursuant to s. 608.4421.
 All remaining property and assets have been distri rights and interests. 	buted among its members	s in accordance with their respective
7. CHECK ONE:		
There are no suits pending against the cor	npany in any court.	
OR- Adequate provision has been made for the entered against it in any pending suit.	e satisfaction of any judgr	ment, order or decree which may be
Signatures of the members having the same percentage of	of membership interests n	ecessary to approve the dissolution:
Signature	,	Printed Name
1/11/1	_ ,	
Metalle Agor	N	chelle Separ (Carus)
.50		J
	,	

FILING FEE: \$25.00