

LD9000006541

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

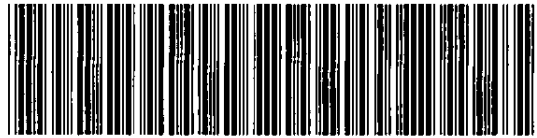
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
10 FEB - 8 AM 10:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. Colligan FEB - 9 2010

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SLSL VENTURES, 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:

JAMES M. PASAG
(Name of Person)

(Firm/Company)

2901 NOTRE DAME DR
(Address)

ORLANDO, FL 32826
(City/State and Zip Code)

For further information concerning this matter, please call:

JAMES M. PASAG at (407) 381-9458
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ 30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$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

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Date: 8 January 2010

From: James M. Pasag

2901 Notre Dame Dr.

Orlando, Florida 32826

To: FLORIDA DEPARTMENT OF STATE

Secretary of State

Division Of Corporations

Tallahassee, Florida 32302

To whom it may concern:

This letter is sent to you in behalf of SLSL VENTURES, LLC Document number L09000006541, requesting to cancel me of your list because this business is no longer in operation and has never been.

Although there has never been any transactions or income generated during the year 2009, am I still required to file an annual report? Please advice. Thank you.

Respectfully yours,


James M. Pasag

DSS Fla LLC

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

FILED

10 FEB -8 AM 10: 35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is

SLSL VENTURES, LLC

2. The Articles of Organization were filed on _____ and assigned document number

L09000006541

3. The date the dissolution was approved: 4 FEBRUARY 2010

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).

THE SUBJECT COMPANY HAS NEVER BEEN
IN OPERATION

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

JAMES M. PASAG