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

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SECRETARY OF STATE AND A STATE FLORIDA

J. BRYAN

SEP 17 2010

EXAMINER

COVER LETTER

Registration Section

Tallahassee, FL 32314

TO:

Division of C	orporations			
SUBJECT:	Tage Ore Hon	me Staging and . Limited Liability Company)	Design LLC	
The enclosed Articles of Dissolution and fee(s) are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
· 	Chr	istive Forte (Name of Person)		
		(Name of Person)	#SE 6	
	MARKET 12 - 1	(Firm/Company)	夢る所	
(Firm/Company) 14408 Dover Forest Drive (Address)				
		· ·	31	
Orlando, FL 32828 Em 7 (City/State and Zip Code)				
(City/State and Zip Code)				
For further information	n concerning this matter, please	e call:		
Ch	ristine Forte	at (40 7) 40 5	3-4034	
	(Name of Person)	(Area Code & Daytime	e Telephone Number)	
Enclosed is a check for th	ue 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)	
Reg	ILING ADDRESS: istration Section	STREET/COURIER ADDRESS: Registration Section		
	ision of Corporations . Box 6327	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	Side 2
Stage Ore Home	Staging and Designable
2. The Articles of Organization were filed on	20/2009 and assigned document sambe
3. The date the dissolution was approved:	116/09
4. A description of occurrence that resulted in the limite 608.441, Florida Statutes, (copy 608.441 on back cov	d liability company's dissolution pursuant to section ver letter).
No business activi	no plans for future
	No plans for future
activity.	
5. CHECK ONE:	
OR-Adequate provision has been made for the de 6. All remaining property and assets have been distribut rights and interests. 7. CHECK ONE: There are no suits pending against the comparation of the design of t	nited liability company have been paid or discharged. ebts, obligations and liabilities pursuant to s. 608.4421. ed among its members in accordance with their respective my in any court. tisfaction of any judgment, order or decree which may be
gnatures of the members having the same percentage of n	nembership interests necessary to approve the dissolution:
Signature	Printed Name
Mustine & Horte	Christine R Forte
