10900050306

•	
•	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-UF	P WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
· · · · · · · · · · · · · · · · · · ·	
Special Instructions	s to Filing Officer:
1	
:	

Office Use Only



400186749254

10/19/10--01048--009 **25.00

FILED

10 OCT 19 PH 4: 53
SLURE JARY OF STATE
TALLAHASSEE, FLORIN,

D. BRUCE

OCT 20 2010

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: St. Augustine Scapworks, UC (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:
Michele A. Fouts (Name of Person)
(Firm/Company)
703 NE Rosa Parks Way
Portland OR 97211 AFF ST T
For further information concerning this matter, please call:
Michele Fouts at (386) 972-1133 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee Certificate of Status S55.00 Filing Fee & Certificate of Status Certificate of Status Certificate of Status 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

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is	
St. Augustine Say	oworks
2. The Articles of Organization were filed on	30, 2010 (or Oct. 11, 2010) date of filing
Partite 1101	to our or ronac
 5. CHECK ONE: All debts, obligations and liabilities of the lim OR-OR-Adequate provision has been made for the debt. 6. All remaining property and assets have been distribute rights and interests. 7. CHECK ONE: There are no suits pending against the compar-OR- 	
Signatures of the members having the same percentage of m	embership interests necessary to approve the dissolution:
Signature	Printed Name
Midule A fouts	Michele A. Fouts
anny	Shannon M. Zambito