1 L09000074157

| (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: |
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| |

Office Use Only



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SEUNLIARY OF STATE
AND ASSET FLORIDA

B. BOSTICK
FEB 11 2011
EXAMINER

COVER LETTER

| | ion Section of Corporations | | | | | | |
|----------------------|---|----------------------------------|---|---|--|-----------|-----|
| SUBJECT: | 8315 | Saulray | LLC nited Liability | Company) | | | |
| • | | (Name ordin | miled Liaomity | company) | | | |
| The enclosed Artic | cles of Dissolution | and fee(s) are subr | mitted for filing | | | | |
| Please return all co | orrespondence cond | perning this matter | to the following | g: | | | |
| - , | Laurie | Sweigar | Name of Person) | | | | |
| <u>-</u> | Friend | ly Comp | uter Sirm/Company) | vervices | Inc | se 11 | |
| _ | 8315 | N. Sau | (Address) | 51 | AHAS | FEB I | 7 |
| - , ; : | Ministra Lamp | 332H | 33 | 5604 111 | | O AMII:34 | |
| For further inform | ation concerning th | • | | 10) | ORIDA | : 34 | |
| La | urie S | weigart erson) | at (| 413 <u>93</u> Area Code & Daytim | 36 - 7444 e Telephone Numb | | |
| Employed to a sharts | | : | | | | • | |
| \$25.00 Filing Fee | for the following amo | Filing Fee & Ficate of Status | \$55.00 Filin Certified (additional | ng Fee & Copy al copy is enclosed) | \$60.00 Filin Certificate of S Certified Copy (additional cop | Status & | :d) |
| I I I | MAILING ADI Registration Sec Division of Corp P.O. Box 6327 Fallahassee, FL | tion porations | | STREET/COU Registration Sec Division of Cor Clifton Building 2661 Executive | ction porations- g | ESS: | |
| | | , , | .*., | Tallahassee, FL | | | |

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

| 1. The name of a limited liability company is |
|---|
| 8315 Santray, LLC. |
| 2. The Articles of Organization were filed on 08 3 2009 and assigned document number L09 0000 74 157 |
| 3. The date the dissolution was approved: 63 12011. |
| 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). |
| All business of LLC concluded and LLC is |
| no longer needed. |
| 608.441.4 |
| |
| 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. |
| 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 |
| Teremy Nelson |
| |
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