

L12-000008850

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

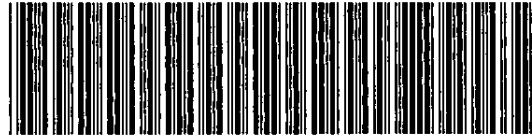
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900242241089

12/11/12--01004--008 **30.00

FILED
2012 DEC 11 PM 12:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. CLINE

DEC 12 2012

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Sagabon New York 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:

Rosemary Moore

(Name of Person)

Sagabon New York LLC

(Firm/Company)

469 NE 76th Street

(Address)

Miami, FL 33138

(City/State and Zip Code)

For further information concerning this matter, please call:

Rosemary Moore

(Name of Person)

at (631) 903-9269

(Area Code & Daytime Telephone Number)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2012 DEC 11 PM 12:06

FILED

Enclosed is a check for the following amount:

p \$25.00 Filing Fee

\$30.00 Filing Fee &
Certificate of Status

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

p \$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
Sagabon New York LLC

2. The Articles of Organization were filed on January 19, 2012 and assigned document number
L12000008850

3. The date the dissolution was approved: December 1, 2012

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).

Both managing partners have moved out of the state of Florida to pursue outside
business options unrelated to Sagabon New York LLC and wish to no longer
manage or own Sagabon New York LLC.

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 section 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

Siobhan Egan
Rosemary Moore

Siobhan Egan

Rosemary Moore

2012 DEC 11 PM 12:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED