112000029374

(Requestor's Name)				
(Address)				
(Address)				
(City	/State/Zip/Phone	e#)		
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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01/25/13--01002--003 **25.00



125/13

COVER LETTER

	tion Section of Corporations				
SUBJECT: US	TSANFORD LLC				
	(Name of Li	mited Liability Company)	-		
The enclosed Art	icles of Amendment and fee(s) are sul	omitted for filing.			
Please return all o	correspondence concerning this matter	r to the following:			
	Post-Formation Filings				
-	(Name of Person)				
-	My Corporation Business Services, Inc.				
	(Firm/Company)				
-	23586 Calabasas Rd., Suite 102 (Address)				
	Cala	basas, CA 91302			
		/State and Zip Code)			
For further inform	nation concerning this matter, please	call:			
	Post Formations	at (_877)_692-677	72		
	(Name of Person)	(Area Code & Daytime	Telephone Number)		
Enclosed is a check	k for the following amount:				
√ \$25 .00 Filing Fe	ee \$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:			RIER ADDRESS:		
Registration Section Division of Corporations		Registration Section Division of Corporations			
P.O. Box 6327 Tallahassee, FL 32314		Clifton Building 2661 Executive Center Circle			
rananassee, FL 32314		Tallahassee, FL 32301			

23586-Calabasas Rd. State 102 Calabasas, CA 91302 Toll-Free: 888-692-6778 | Fax: 818-879-8005 Email: customerservice@mycorporation.com

ROUTINE SERVICE FILING REQUEST

January 16, 2013

Division of Corporations Florida Department of State Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Re: USTsanford LLC

Ladies and Gentlemen:

Please find enclosed for filing dissolution documents for the above referenced entity.

Also enclosed is a check for filing fees.

Please return the filed documents to the address below.

Thank you for your assistance.

Sincerely,

MyCorporation 23586 Calabasas Rd. Suite 102 Calabasas, CA 91302

ATTN: Post Formation Filings

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

FILED

2013 JAN 25 AM 8: 43

1. The name of a limited liability company is		SECHE LARY OF STATE TALLAHASSEE, FLORIDA
USTSANFORD LLC		MALLAMASSEE, FLORIDA
2. The Articles of Organization were filed on	02/29/2012	and assigned document number
t		
3. The date the dissolution was approved: 01/14/201	13	·
4. A description of occurrence that resulted in the lin 608.441, Florida Statutes, (copy 608.441 on back	nited liability company' cover letter).	s dissolution pursuant to section
upon the written consent of all the members of the li	mited liability company.	
C CUPON ONE		
5. CHECK ONE:	- 1::	b b
All debts, obligations and liabilities of the		
Adequate provision has been made for the		•
All remaining property and assets have been distr rights and interests.	ibuted among its member	ers in accordance with their respective
7. CHECK ONE:		
There are no suits pending against the co	mpany in any court.	
OR- Adequate provision has been made for the entered against it in any pending suit.	e satisfaction of any jud	gment, order or decree which may be
ignatures of the members having the same percentage	of membership interests	s necessary to approve the dissolution:
Signature C		Printed Name
Leonard ODomell	Leonard C	Donnell, Member
	 	

FILING FEE: \$25.00