

413000121312

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

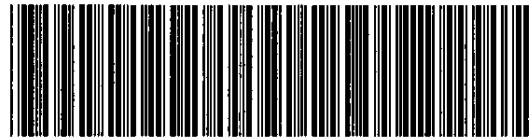
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

P.15

Office Use Only



200253925052

11/18/13--01016--009 **30.00

FILED

13 NOV 18 PM 12:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NOV 20 2013

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SANER SOLUTIONS 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:

NICOLA JANE SANER
(Name of Person)

(Firm/Company)

2000 MERCHANTS ROW BLVD, APT 724
(Address)

TALLAHASSEE, FLORIDA 32311
(City/State and Zip Code)

For further information concerning this matter, please call:

NICOLA JANE SANER at (786) 294 7590
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

p \$25.00 Filing Fee

p \$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

SANER SOLUTIONS, LLC

2. The Articles of Organization were filed on 8/26/2013 and assigned document number L13000121312.

3. The date the dissolution was approved: 11/14/2013

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).

THE SOLE OWNER DOES NOT WISH TO CONTINUE THE BUSINESS
AND WILL DISSOLVE IT IMMEDIATELY. ALL ASSETS WILL BE DISTRIBUTED
ACCORDINGLY, EFFECTIVE IMMEDIATELY

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. 608.441.

6. All remaining property and assets have been distributed among its members in accordance with the respective rights and interests.

7. CHECK ONE:

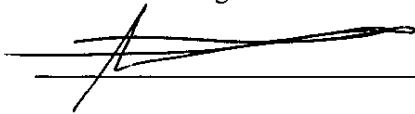
- ☒ There are no suits pending against the company in any court.
-OR-
☐ Adequate provision has been made for the satisfaction of any judgment, order or decree which may be entered against it in any pending suit.

FILED
13 NOV 18 PM 12:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Signatures of the members having the same percentage of membership interests necessary to approve the dissolution:

Signature

Printed Name



NICOLA JANE SANER

