L13000158801

(Requestor's Name)		
(Address)		
(Address)	 	
(City/State/Zip/Phone #)		
PICK-UP WAIT MA	IL	
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		

Office Use Only



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2013 DEC 12 AM 10: 14

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ION SERVICE COMPANY.				
ACCOUNT NO. : 12000000195				
REFERENCE : 919883 4321040				
AUTHORIZATION: publican				
COST LIMIT : \$ 25/.0.0				
ORDER DATE: December 12, 2013				
ORDER TIME : 11:41 AM				
ORDER NO. : 919883-005				
CUSTOMER NO: 4321040				
DOMESTIC FILINGS				
NAME: SIVAN ROAD LLC				
XX ARTICLES OF DISSOLUTION				
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:				
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING				
CONTACT PERSON: Carina L. Dunlap - EXT# 52951				
EXAMINER'S INITIALS:				

FILED .

2013 DEC 12 AM 10: 14

SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

The name of a limited liability company is Sivan Road LLC	,	
2. The Articles of Organization were filed on	November 12, 2013	and assigned document number
3. The date the dissolution was approved:	cember 2, 2013	
4. A description of occurrence that resulted in 608.441, Florida Statutes, (copy 608.441 on	the limited liability compar	ny's dissolution pursuant to section
The sole member consented in writing to disso	olve the LLC.	
5. CHECK ONE:		
All debts, obligations and liabilities -OR- Adequate provision has been made:	•	
6. All remaining property and assets have been rights and interests.	-	
7. CHECK ONE:		
 ☑ There are no suits pending against the OR- ☑ Adequate provision has been made entered against it in any pending suite 	for the satisfaction of any it	udgment, order or decree which may be
matures of the members having the same percen	ntage of membership interes	sts necessary to approve the dissolution:
Signature)		Printed Name
Trans Stuller "	Congare	e River LLC
lanaging Member		
		

FILING FEE: \$25.00