

L13000172993

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

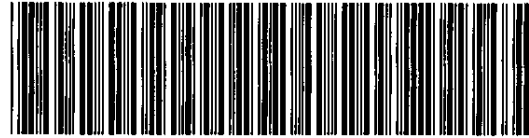
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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03/27/14--01013--028 **25.00

2014 MAR 27 PM 3:48
13000172993

B. BOSTICK

APR - 1 2014

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SAS ENTERPRISE, 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:

SUSAN SIEGEL
(Name of Person)

(Firm/Company)

Susan Montiegel Siegel
11591 Acosta Avenue
Orlando, Florida 32836
(Address)

(City/State and Zip Code)

For further information concerning this matter, please call:

SUSAN SIEGEL
(Name of Person)

at 407 217 6799
(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

\$25.00 Filing Fee and Certificate of Dissolution

\$55.00 Filing Fee, Certificate of Dissolution &
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

2014 MAR 27 P 3:48

FILED

**ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is

SAS ENTERPRISE LLC

2. The Articles of Organization were filed on _____ and assigned

document number L13 000 172993

3. The delayed effective date the dissolution is not effective on the date of filing: _____
(effective date cannot be prior to or more than 90 days later than date document is received for filing)

4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).

NO LONGER IN BUSINESS

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:

Susan Montiegal Siegel
11591 Acosta Avenue
Orlando, Florida 32836

6. Signature of an authorized person or if there are no members, the signature of the person appointed and listed above to wind up the company's activities and affairs:


Signature

SUSAN SIEGEL
Printed Name

FILING FEE: \$25.00