

L15 000203866

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

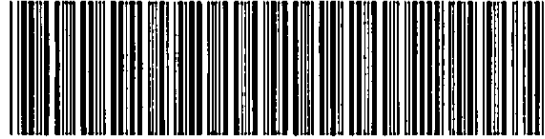
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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2022 MAR 14 PM 1:03
Filing Office

O SIMMONS

MAR 21 2022

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SAT SPE #1, 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:

Jamie Rusbridge

(Name of Person)

Southern Aggregate Transport Services

(Firm/Company)

12012 South Shore Blvd. #107

(Address)

Wellington, FL 33414

(City/State and Zip Code)

For further information concerning this matter, please call:

Jamie Rusbridge

(Name of Person)

561

249-3728

at (_____) _____

(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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

1. The name of a limited liability company is
SAT SPE #1, LLC

2022 MAR 16 PM 3:53

2. The Articles of Organization were filed on 12/7/2015 and assigned
document number L15000203866

3. The delayed effective date the dissolution if 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)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be
listed as the document's effective date on the Department of State's records.

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).

Stopped operations and closed business

Stopped operations and closed business

Stopped operations and closed 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:

Harold J. Rusbridge

12012 South Shore Blvd, #107

Wellington, FL 33414

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

Harold J. Rusbridge

Printed Name

FILING FEE: \$25.00