PQ5000035988

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Na	me)
(Do	ocument Number	
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
		,
		





600142002856

01/30/09--01017--023 **43.75

WWW.

00 IEN 20 EM 2-55

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: S.A.S.GN	SULANTS, IN C.
OCUMENT NUMBER:	5000035988
The enclosed Articles of Dissolution and fe	
Please return all correspondence concerning	this matter to the following:
Scott S	CNRAGER. Contact Person)
(Name of C	Contact Person)
1900 Heyp	OSTEAD TPKE. Suite 20 Idress)
EAST MEADOU	e and Zip Code)
For further information concerning this matt	
	at (56) 217-2500 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amour	nt:
\$35 Filing Fee \$43.75 Filing Fee & [Certificate of Status]	\$43.75 Filing Fee & \$\sum \\$52.50 Filing Fee, Certified Copy (Additional copy is enclosed) \$\sum \\$60 \sum \\$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
MAILING ADDRESS: Amendment Section	STREET ADDRESS:
Division of Corporations	Amendment Section Division of Corporations
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION 09 JÁN 30 AM 8: 55

Pursuant to section 607.1401, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST:	The name of the corporation as currently filed with the Florida Department of State:
	S.A.S. CONSULTANTS, INC.
SECOND:	The document number of the corporation (if known): Po5 0000 35988
THIRD:	The file date of the articles of incorporation: 3905
FOURTH:	(CHECK AT LEAST ONE BOX)
	None of the corporation's shares have been issued.
	The corporation has not commenced business.
FIFTH:	No debt of the corporation remains unpaid.
SIXTH:	The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.
SEVENTH:	Adoption of Dissolution (CHECK ONE)
	A majority of the incorporators authorized the dissolution.
	A majority of the directors authorized the dissolution.
Signa	(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.) Robert Rampolla (Typed or printed name of person signing) (Title of Person Signing)
	(Title of Person Signing)

Filing Fee: \$35

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution. Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution. Description of information that must be included in a claim: Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.