

L08000028755

(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:

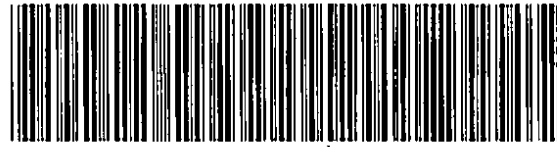
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FILED

S. WARREN

AUG 07 2017



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 13, 2017

GARY WARREN
24273 COUNTY ROAD 49
O'BRIEN, FL 32071

SUBJECT: SULLIVAN PINESTRAW SALES, LLC
Ref. Number: L08000028755

We have received your document for SULLIVAN PINESTRAW SALES, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The limited liability company must complete and submit a Voluntary Dissolution along with the attached Notice of Dissolution in order to dissolve a Florida limited liability company on our records. The fee to file both the Voluntary Dissolution and Notice of Dissolution is \$25.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Stacey M Warren
Regulatory Specialist II

Letter Number: 417A00014238

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Sullivan Piwstrow Sales 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:

Gary Warren
(Name of Person)

Sullivan Piwstrow Sales LLC
(Firm/Company)

24273 County Road 49
(Address)

Orlando Florida 32871
(City/State and Zip Code)

For further information concerning this matter, please call:

Gary Warren at (386) 362-8209 cell
(Name of Person) (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

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is

Sullivan Pines Road Sales LLC

2. The Articles of Organization were filed on July 2017 and assigned

document number LC 800002878 D

3. The delayed effective date the dissolution if not effective on the date of filing: July 2016
(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).

The company was a loss - the income did not
support the expenses of the LLC

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

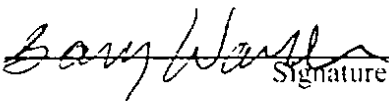
Gary Warren

24273 County Road 49

C'Brien Florida 32071

386 938-2327

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

Gary Warren
Printed Name

FILING FEE: \$25.00

FILED
17 AUG - 3 PM 4: 15
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA