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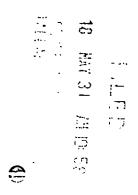
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PICK-UP	☐ WAIT	MAIL		
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May 11, 2018

LISA CURLEY 6029 WINDING RIDGE LN PORT ORANGE, FL 32128

SUBJECT: SIGN2SHINE, LLC Ref. Number: L10000012545

We have received your document for SIGN2SHINE, 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 attached form must be completed in order to file the document.

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

Octavia L Simmons Regulatory Specialist III

Letter Number: 918A00009870

See attached

Lisa Curley Sign2Shine, LLC 6029 Winding Ridge Lane Port Orange, FL 32128 4/15/18

To Whom It May Concern,

I, the owner/manager of Sign2Shine, LLC as of April 15, 2018, wish to dissolve this entity due to lack of time to attend to it. The business has been inactive the past several years, and I see no reason to maintain it at this time. Enclosed is a check for \$25.

Thank you,

isa Curley

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

I. The name of a limited liabil				
Sign 2 Shin	e LLC			<u></u> ·
	•	7/2/2010		
2. The Articles of Organization	n were filed on	213/2010	and assigned	
document number	10000 1254			
3. The delayed effective date t (effective Note: If the date inserted in t listed as the document's effective date to the delayer of the date in the delayer of the delayer	date cannot be prior to or it his block does not meet the	ne applicable statutory in	iling: \frac{\frac{1}{-1}^{-1}}{\text{date document is received}} \text{ing requirements, this documents}	・2017 for filing) ate will not be
4. A description of occurrence 605.0707, Florida Statutes. (that resulted in the lin	nited liability company	's dissolution pursuan	itto section
The husiness	copy 603.0707 on back	usection for	~ Sover	· · · · · · ·
				<u> </u>
years due	to familial	needs. I	See no	
•				
need to main	Trun IT at	This Time		
			-	·
5. If there are no members, en	ter the name and addre	ss of the person appoin	ited to wind up the co	mpany`s
activities and affairs:	Lisa Cu	1		
	-	,		.
	<u> 6029 1</u>	winding Ri	dge Ls.	
	Port O1	Cashe FL	32/28	
		,		
6. Signature of an authorized listed above to wind up the co	person or if there are no mpany's activities and	o members, the signatu affairs:	re of the person appoi	inted and
\mathcal{J} . Ω	17			
Auxa (un	V_{o}	Lisa	Curley	
Signature		Pr	inted Name	

FILING FEE: \$25.00