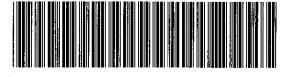
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(Requestor's Name)				
	(Address)			
	(			
•	(Address)			
	(City/State/Zip/Phone #)			
		•		
PICK-UF	P WAIT	MAIL		
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— · · · · · · · · · · · · · · · · · · ·	(Business Entity Name)			
•				
	(Document Number)			
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Special Instructions	to Filing Officer:			
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S. HAWKES
JAN 2 6 2009
EXAMINER

## COVER LETTER

	ation Section on of Corporations				
SUBJECT:	Sunrise Tr	ading	Com	pany	درد
(Name of Limited Liability Company)					
The enclosed Ar	rticles of Dissolution and fee(s) are sub	mitted for filing.			
Please return all	correspondence concerning this matter	to the following:			
		. •			
	Peter D 5	Plame of Person)			
	,				
(Firm/Company)					
13300 Okeechobee Road (Address)					
		(Address)			
	Ft Pierce Fl	34945			
Ft Pierce FL 34945 (City/State and Zip Code)					
	्याम अवद् राज्यसम्	the state of the s			
For further information concerning this matter, please call:					
Peter D Spyke at (772) 464-3391  (Name of Person)  (Approach & Dayting Telephone Number)					
	(Name of Person)	(Area C	Code & Daytime	Telephone Numbe	r)
P 4 4: 1					
$\rightarrow$	ck for the following amount:				
\$25.00 Filing F	ee30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee Certified Copy		S60.00 Filing Certificate of St	
,		(additional copy	y is enclosed)	Certified Copy (additional copy	y is enclosed)
	MANUAL ADDRESS	COMP			200
	MAILING ADDRESS: Registration Section		istration Sect	RIER ADDRI	799:
	Division of Corporations	Divi	ision of Corp		
1. 1	P.O. Box 6327	Cliff	ton Building		
	Tallahassee, FL 32314	266		Center Circle	
Tallahassee, FL 32301					
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## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is	
Sunrise Tradin	g Company LLC
2. The Articles of Organization were filed on	and assigned document number
3. The date the dissolution was approved: $\frac{12}{12}$	3//08
4. A description of occurrence that resulted in the li 608.441, Florida Statutes, (copy 608.441 on back	imited liability company's dissolution pursuant to section
No Longe Operating	7
	7 5
-OR-	ne limited liability company have been paid or discharged. he debts, obligations and liabilities pursuant to s. 608.4421.
	ributed among its members in accordance with their respective
7. CHECK ONE:	
There are no suits pending against the co-OR-Adequate provision has been made for the entered against it in any pending suit.	ompany in any court.  he satisfaction of any judgment, order or decree which may be
signatures of the members having the same percentage	e of membership interests necessary to approve the dissolution:
Signature	Printed Name
#4AM	Peter D Spyke
Red Dr. J	Rue L Brown Jr
·······	· · · · · · · · · · · · · · · · · · ·

FILING FEE: \$25.00