

Lo6000039743 ✓

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

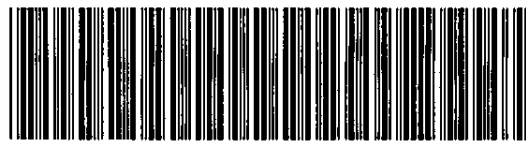
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2014 JAN -2 PM 5:14  
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## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**Drunk Astronaut Productions**

**SUBJECT:** \_\_\_\_\_  
(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:

**Yaniv Raz**

\_\_\_\_\_  
(Name of Person)

**Drunk Astronaut Productions**

\_\_\_\_\_  
(Firm/Company)

**10531 Bexley Blvd**

\_\_\_\_\_  
(Address)

**Boca Raton, Fl. 33428**

\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

**Yaniv Raz**

**323**

**4818406**

at ( )

\_\_\_\_\_  
(Name of Person)

\_\_\_\_\_  
(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

**\$25.00 Filing Fee and Certificate of Dissolution**

**\$30**

**\$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  
**Drunk Astronaut Productions, LLC**

2. The Articles of Organization were filed on **04/17/2006** and assigned  
document number **L06000039743**

3. The delayed effective date the dissolution if not effective on the date of filing: **1/15/2014**

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).  
**Unable to procure sufficient investment to continue.**

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

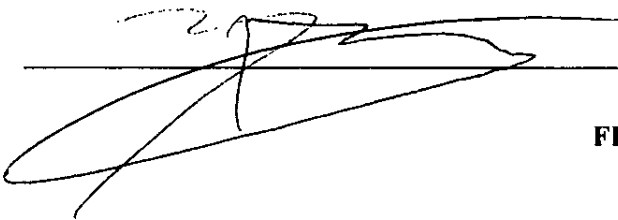
**10531 Bexley Blvd**

**Boca Raton, fl 33428**

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

Printed Name



**YANIV RAZ**

**FILING FEE: \$25.00**

2016 JAN -2 PM 5:14  
TALLAHASSEE - FLORIDA