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PICK-UF	WAIT MAIL				
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COVER LETTER

TO:

Registration Section Division of Corporations

Subject: Sunshine Investments and Holdings 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:

Wendy L. Simeur					
(Name of Person)					
Personal Rep. for Robert Lowenthal					
(Firm/Company)					
1201 Birch Falls Drive					
(Address)					
Bellingham, WA 98229					
(City/State and Zip Code)					

For further information concerning this matter, please call:

Wendy Simeur	_{at (} 360	306-8459
(Name of Person)	(Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:		
■ \$25.00 Filing Fee and Certificate of Dissolution	_	Fee, Certificate of Dissolution & py (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 Sunshine Investments and Holdings LLC							
2.	The Articles of Organization	on were filed on August 4, 2	and assigned					
	document number 1.060000	77225.						
3.	Note: If the date inserted in	ayed effective date the dissolution if not effective on the date of filing: teffective date cannot be prior to or more than 90 days later than date document is received for filing) f the date inserted in this block does not meet the applicable statutory filing requirements, this date will no the document's effective date on the Department of State's records.						
4.	A description of occurrence 605.0707. Florida Statutes,		I liability company's dissolution pursuan ver letter).	t to sectio				
	Consent of all the successors i	• • •	•					
5.	If there are no members, en		f the person appointed to wind up the cor Il Representative for Robert Lowenthal	mpapy's				
a	activities and arrans.	1201 Birch Falls Drive						
		Bellingham, WA 98229	b -	12				
6. lis	Signature of an authorized sted above to wind up the co	person or if there are no me mpany's activities and affa	embers, the signature of the person appoirs:	nted and				
	leita Smen	1	Wendy L. Simeur					
	Signature		Printed Name					

FILING FEE: \$25.00