1060000 77225

(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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12/07/18--01013--012 **25.60

John Start

2018 DEC -7 AM 10: 00 SECRETARY OF STATE

COVER LETTER

	stration Section ion of Corporations		
SUBJECT:	Sunshine Investments and	Holdings, LLC	
John Cr.	Name	of Limited Liabi	lity Company
Dear Sir or M	Aadam:		
The enclosed	Statement of Termination and	fee(s) are submit	ited for filing.
Please return	all correspondence concerning	this matter to the	e following:
Wendy L. S	Simeur		
	Name of Person		
Personal R	epresentative for Robert Low	venthal	
	Firm/Company		
1201 Birch	Falls Drive		
	Address		
Bellingham	, WA 98229		
	City/State and Zip Code		
wsimeur@g	gmail.com		
E-mail addr	ess: (to be used for future annu-	al report notifica	tion)
For further in	nformation concerning this matt	er, please call:	
Wendy L. S	imeur	360 at (306-8459
	Vame of Person	Annu Cada	Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

CR2E141 (2/14)

STATEMENT OF TERMINATION

FILED

Pursuant to section 605.0709(7). Florida State	utes. I hereby submit the following Sta 2018.DEG (77ern AMaQ 6;D0
FIRST: The name of the limited liability con	npany is: Sunshine Investments and Heldings LLGF STATE
	TALL AHASSEE, FL
SECOND: The Florida Document number o	f the limited liability company is: L06000077225
THIRD: The date of filing of the initial artic	les of organization is: August 4, 2006
FOURTH: The date of filing of the dissolution	ion is: November 9, 2018
FIFTH: This limited liability company has c that it will file a statement of termination.	completed winding up its activities and affairs and has determined
that it will me a statement of termination,	
illiant smem	
Ullilles SMEW Personal representative for Robert Lawenthal	Wendy L. Simeur
Signature of Authorized Representative	Typed or printed name of signature

Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)

CR2E141 (2/14)