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Study Study

B. BOSTICK

JAN 1 7 2012

EXAMINER



COVER LETTER

TO: Registration Section Division of Corporations SUBJECT: SUNSHINE ASSOCIATES, 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: SUE ANN YOCKEY (Name of Person) SAYOCKEY CONSULTING P.A. (Firm/Company) 9278 HEATHRIDGE DRIVE (Address) WEST PALM BEACH, FL 33411 (City/State and Zip Code) For further information concerning this matter, please call: SUE ANN YOCKEY (Name of Person) (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: \$25.00 Filing Fee \$55.00 Filing Fee & \$60.00 Filing Fee, 30.00 Filing Fee &

Certified Copy

(additional copy is enclosed)

MAILING ADDRESS:

Certificate of Status

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

STREET/COURIER ADDRESS:

Certificate of Status & Certified Copy

(additional copy is enclosed)

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 comp	-		
2. The Articles of Organization were file L06000097736	ed on 10/05/2006	and assig	gned document number
3. The date the dissolution was approved	_{d:} 12/31/2011		
4. A description of occurrence that resul 608.441, Florida Statutes, (copy 608.4 UPON THE OCCURRENCE OF	ted in the limited liabilit 141 on back cover letter)		
5. CHECK ONE:			
All debts, obligations and lial one-oR-Adequate provision has been 6. All remaining property and assets have rights and interests. 7. CHECK ONE:	made for the debts, oblig	gations and liabilities pursu	ant to s. 608.4421.
There are no suits pending ag -OR- Adequate provision has been entered against it in any pend	made for the satisfaction		decree which may be
Signatures of the members having the same	percentage of membersh	nip interests necessary to ap	oprove the dissolution:
Signature		Printed N	ame
	_	AMIR LUBARSH	KY MĎ
			2 JAI
	-		CO CO Codes
	-		- Paraller
	-		FLORIDA
•	¥ 2 °		RIDA