

LD7000035044

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

2016 OCT -3 P 4:12

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D. BRUCE
OCT 04 2016

No 3



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 14, 2016

ALARIA KIRAZ
477 S RANCHO LINDO DR
COVINA, GA 91724

SUBJECT: SUN PH54, LLC
Ref. Number: L07000035044

We have received your document for SUN PH54, LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce
Regulatory Specialist II

Letter Number: 916A00019601

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SUN PH54, 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:

Alaria Kiraz

(Name of Person)

SUN PH54, LLC

(Firm/Company)

477 S. Rancho Lindo Dr

(Address)

Covina, CA 91724

(City/State and Zip Code)

For further information concerning this matter, please call:

Alaria Kiraz

(Name of Person)

at (626) 806-8395

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee and Certificate of Dissolution

☐ \$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

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TALLAHASSEE, FL 32301
DIVISION OF CORPORATIONS

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**ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is

SUN PH54, LLC

2. The Articles of Organization were filed on 04/30/2007 and assigned

document number L07000035044

3. The delayed effective date the dissolution if not effective on the date of filing: _____
(effective date cannot be prior to or more than 90 days later than date document is received for filing)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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).

Not doing business in Florida. Sold property

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

Alaria Kiraz AKA Alaria Saar

477 S. Rancho Lindo Dr

Covina, CA

91724

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OCT - 8 P 12
CLARK COUNTY, FLORIDA

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

9/10/2016
Printed Name

FILING FEE: \$25.00