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SECRETARY OF STATE

COVER LETTER

	stration Section sion of Corporations	
SUBJECT:	Shafran Family Holding	s, LLC
•	(Name of	Limited Liability Company)
The angloced	Articles of Dissolution and fee(s) are s	ubmitted for filing
	all correspondence concerning this mat	_
riouse retain t	an correspondence concerning this mac	ter to the following.
	Linda S. Vaughan	
		(Name of Person)
	Cox & Carlson	
(Firm/Company)		
	1185 Immokalee Rd.,	(Address)
	Naples, FL 34110	
	(C	ity/State and Zip Code)
For further inf	ormation concerning this matter, pleas	e call:
Linda Vaughan		at (239) 438-4611
	(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a ch	eck for the following amount:	
\$25.00 Filing	Fee 30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & \$60.00 Filing Fee, Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
	MAILING ADDRESS:	STREET/COURIER ADDRESS:
	Registration Section Division of Corporations	Registration Section Division of Corporations
	P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned Managing Member of the Company provides that the following information is true and correct:

- 1. The name of the limited liability company is: SHAFRAN FAMILY HOLDINGS, LLC (the "Company").
- 2. The Articles of Organization were filed on February 6, 2009 and assigned document number: L09000012446
 - 3. The date of the dissolution will be effective as of $\frac{24}{24}$, 2011.
- 4. The description of occurrence that resulted in the limited liability company's dissolution pursuant to section 608.441, Florida Statutes:

The above referenced limited liability company has been dissolved upon the written

Consent of all of the members of the limited liability company pursuant to section

608.441 of the Florida Statutes.

- 5. All debts, obligations and liabilities of the limited liability company have been paid or discharged.
- **6.** All remaining property and assets have been distributed among its members in accordance with their respective rights and interests.
 - 7. There are no suits pending against the Company in any court.

Signature of the Manager and Members is necessary to approve the dissolution:

SHAFRAN FAMILY HOLDINGS, LLC

Arthur A. Shafran, Manager

CONSENT TO ACTIONS TAKEN WITHOUT A MEETING OF THE MEMBER AND MANAGER OF SHAFRAN FAMILY HOLDINGS, LLC



The undersigned, being all of the Members and the Manager of SHAFRAN FAMILY HOLDINGS, LLC a Florida limited liability company (the "Company"), do hereby consent to the adoption of the following resolutions:

WHEREAS, the Members of the Company wish to dissolve the Company; and

WHEREAS, Pursuant to the Operating Agreement and sections 608.441 of the Florida Statutes, the Members hereby approve the Manager to complete all acts necessary to complete the dissolution of the Company;

NOW, THEREFORE, the undersigned, being all of the Members and Managers of the Company, in accordance with the Florida Limited Liability Company Act relating dissolution of a limited liability company in sections 608.441 of the Florida Statutes, by signature hereto, do hereby consent to the following actions by the Manager of the Company:

RESOLVED, the Manager of the Company hereby determines the Company shall be dissolved and shall file Articles of dissolution with the Florida Department of State, Division of Corporations; and be it further

RESOLVED, that the Members of the Company hereby authorize all acts to be taken by the Manager of the Company to dissolve the Company in accordance with the Operating Agreement and the Florida Statutes in effect as of the date subscribed below.

Dated effective as of <u>(lufust 24</u>, 2011.

SHAFRAN FAMILY HOLDINGS, LLC:

y: <u>(</u>____

Arthur A. Shafran, Manager

MEMBERS:

Bv:

Arthur A Shafra

Lusia Shafrai

By: Sandra Korn

By: Yui

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