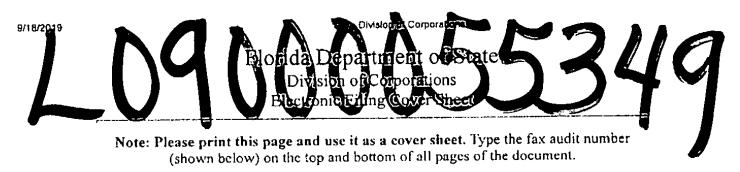
1/1



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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : BRETT HENDEE, P.A. Account Number : 119980000066

Phone : (813)258-1177

: (813)259-1106 Fax Number

LLC DISSOLUTION OR WITHDRAWAL SANAN PRIVATE EQUITY, LLC

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 03 |
| Estimated Charge | \$25.00 |

Electronic Filing Menu Corporate Filing Menu

Help

SEP 19 2019 M. SOLOMON (((H19000279783 3)))

COVER LETTER

TO:

Registration Section
Division of Corporations

Sanan Private Equity, 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:

| Matthew R. Schroeder, Esq. |
|------------------------------|
| (Name of Person) |
| Brett Hendee, P.A. |
| (Fim/Company) |
| 1700 S. MacDill Ave, STE 200 |
| (Address) |
| Tampa, FL 33629 |
| (City/State and Zip Code) |

For further information concerning this matter, please call:

Matthew R. Schroeder at (813 258-1177 (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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ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

| 1. | The name of a limited liabilit Sanan Private Equity, LLC | y company is | | |
|---------|--|---|---------------------------------------|---|
| 2. | The Articles of Organization | were filed on June 8, 2 | 009 | and assigned |
| | document number L09000055 | | _ | |
| 3. | The delayed effective date th (effective of Note: If the date inserted in th listed as the document's effecti | is block does not meet th | e applicable statutory fi | filing: n/a date document is received for filing) lling requirements, this date will not be |
| 4. | A description of occurrence 605.0707, Florida Statutes, (c | that resulted in the limitopy 605.0707 on back | ited liability company cover letter). | y's dissolution pursuant to section |
| | The members of the company of | | | ant to F1. Stat. 605.0701(2). |
| | | | | |
| 5. | If there are no members, ento | er the name and addres | s of the person appoi | nted to wind up the company's |
| | | | | |
| | | | | |
| 6 li | . Signature of an authorized p sted above to wind up the con | person or if there are no ipany's activities and a | members, the signat | ure of the person appointed and |
| | But | | | norized Representative |
| - | Signature | | p | rinted Name |

FILING FEE: \$25.00

(((H190002797833)))

Notice of Limited Liability Company Dissolution

NOTE: This page is optional

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

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A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Brett Hendee, Authorized Representative

Printed Name of the Person Filing

Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00 (((H19000279783 3)))