| 4                                       |                        |  |
|---|------------------------|--|
| (Reque                                  | stor's Name)           |  |
| (Addres                                 | ss)                    |  |
| (Addres                                 | SS)                    |  |
| (City/Sta                               | ate/Zip/Phone #)       |  |
| PICK-UP                                 | WAIT MAIL              |  |
| (Busine                                 | ess Entity Name)       |  |
| (Docum                                  | nent Number)           |  |
| Certified Copies                        | Certificates of Status |  |
| Special Instructions to Filing Officer: |                        |  |
| I SELLE                                 | FRS                    |  |

200216059002

200216059002 01/03/12--01012--018 \*\*30.00

JAN 12 2012

**EXAMINER** 

Office Use Only

## **COVER LETTER**

| TO: Registration Section Division of Corporations  |  |  |
|--|--|--|
| SUBJECT: SUNRISE SUNSET MANATEF GOLF CONCESSION ) 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:  |  |  |
| PEDER JANSSON<br>(Name of Person)  |  |  |
| (Name of Person)   |  |  |
| SUNIPOSE CONCESSIONLS (Firm/Company)   |  |  |
| (Firm/Company)   |  |  |
| 2164 MUSKOUEE TA   |  |  |
| 2164 MUSKOCEE TO (Address)   |  |  |
| Nollomis FL 34275 (City/State and Zip Code)  |  |  |
| (City/State and Zip Code)  |  |  |
| For further information concerning this matter, please call:   |  |  |
| (Name of Person) at (QUI) 2323107<br>(Area Code & Daytime Telephone Number)  |  |  |
| Enclosed is a check for the following amount:  |  |  |
| \$25.00 Filing Fee Certificate of Status  \$55.00 Filing Fee & Certificate of Status  \$60.00 Filing Fee, Certified Copy (additional copy is enclosed)  \$60.00 Filing Fee, 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

# ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

| 1. The name of a limited liability company is  SUNRISE SUNSET MANATE  | E GULF CONCESSIONS LLC   |
|---|--|
| 2. The Articles of Organization were filed on   | .1.  |
| 3. The date the dissolution was approved:  4. A description of occurrence that resulted in the limite 608.441, Florida Statutes, (copy 608.441 on back cov  |  |
|   | •  |
| -OR-Adequate provision has been made for the de  6. All remaining property and assets have been distribut rights and interests.  7. CHECK ONE:  There are no suits pending against the comparation of the design of | ebts, obligations and liabilities pursuant to s. 608.4421.  ed among its members in accordance with their respective any in any court.  tisfaction of any judgment, order or decree which may be   |
| Signatures of the members having the same percentage of n   | nembership interests necessary to approve the dissolution:   |
| Signature   | Printed Name   |
| 1530r   | (FOET JANSSON)   |
| Egensson_   | El ENON JANSSON I  |
|   | LS THE PRIOR OF TH |
| FILING  | FEE: \$25.00   |