## L110000 33035

| (Requestor's Name)                      |  |  |  |  |
|---|--|--|--|--|
|   |  |  |  |  |
| (Address)                               |  |  |  |  |
|   |  |  |  |  |
| (Address)                               |  |  |  |  |
| (City/State/Zip/Phone #)                |  |  |  |  |
| (City/Clato/Zip/ Hollo II)              |  |  |  |  |
| PICK-UP WAIT MAIL                       |  |  |  |  |
|   |  |  |  |  |
| (Business Entity Name)                  |  |  |  |  |
| L11- 33035                              |  |  |  |  |
| (Document Number)                       |  |  |  |  |
|   |  |  |  |  |
| Certified Copies Certificates of Status |  |  |  |  |
|   |  |  |  |  |
| Special Instructions to Filing Officer: |  |  |  |  |
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SECRETARY OF STATE
SHORE TARY OF STATE

## COVER LETTER

|                  | egistration Section<br>livision of Corporations  |   |  |  |  |
|------------------|--|---|--|--|--|
| SUBJECT          | r: Winter Springs Winestyle  | es .  |  |  |  |
|                  |  | Limited Liability Company)                                | -  |  |  |
|                  |  |   |  |  |  |
|                  | sed Articles of Dissolution and fee(s) are su  |   |  |  |  |
| Please retu      | ırn all correspondence concerning this matt  | er to the following:                                      |  |  |  |
|                  | Tim Rehg   |   |  |  |  |
| (Name of Person) |  |   |  |  |  |
|                  | Make a Toast   |   |  |  |  |
|                  | (Firm/Company)   |   |  |  |  |
|                  | 1196 Tree Swallow Dr. #1314  (Address)   |   |  |  |  |
|                  | Winter Springs FL 32708  |   |  |  |  |
|                  | · · · · · · · · · · · · · · · · · · ·  | ty/State and Zip Code)                                    | ·  |  |  |
| For further      | r information concerning this matter, please   | · call·   |  |  |  |
| _                |  |   | 207 2270   |  |  |
| <u> </u>         | (Name of Person)   | at \  | 327-2378<br>& Daytime Telephone Number)  |  |  |
|                  |  |   |  |  |  |
|                  | a check for the following amount:  iling Fee 30.00 Filing Fee & Certificate of Status              | \$55.00 Filing Fee & Certified Copy (additional copy is e | \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |  |  |
|                  | MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | Registra<br>Division<br>Clifton                           | TT/COURIER ADDRESS: ation Section of Corporations Building accutive Center Circle        |  |  |

Tallahassee, FL 32301



## FLORIDA DEPARTMENT OF STATE Division of Corporations

January 17, 2012

TIM REHG 1196 TREE SWALLOW DRIVE #1314 WINTER SPRINGS, FL 32708

SUBJECT: WINTER SPRINGS WINESTYLES, LLC

Ref. Number: L11000033035

We have received your document for WINTER SPRINGS WINESTYLES, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain the effective date of the limited liability company's dissolution.

A description of the occurrence that resulted in the limited liability company's dissolution pursuant to section 608.441, Florida Statutes, must be contained in the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Neysa Culligan Regulatory Specialist II

Letter Number: 212A00001084

www.sunbiz.org

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

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| The name of a limited liability company is     Winter Springs Winestyles, LLC   | TALLAHASSEE, FLORIDA                          |
|---|---|
| 2. The Articles of Organization were filed on   | and assigned document number                  |
| 3. The date the dissolution was approved: 9-1-11  | ·   |
| 4. A description of occurrence that resulted in the limited liability com 608.441, Florida Statutes, (copy 608.441 on back cover letter). | pany's dissolution pursuant to section        |
| Franchise does not allow  | to use the                                    |
| name " wine Styles" in Bu   | riness name                                   |
|   |   |
| 5. CHECK ONE:   |   |
| All debts, obligations and liabilities of the limited liability of  | company have been paid or discharged.         |
| OR-<br>Adequate provision has been made for the debts, obligation   | s and liabilities pursuant to s. 608.4421.    |
| 6. All remaining property and assets have been distributed among its n  | nembers in accordance with their respective   |
| rights and interests.   |   |
| 7. CHECK ONE:   |   |
| There are no suits pending against the company in any cour  | rt.   |
| Adequate provision has been made for the satisfaction of an entered against it in any pending suit.                                       | ny judgment, order or decree which may be     |
| gnatures of the members having the same percentage of membership int  | terests necessary to approve the dissolution: |
| Signature   | Printed Name                                  |
|   | Tim Rehg                                      |
| <u> </u>  |   |
|   |   |
|   | <del></del>                                   |
| · · · · · · · · · · · · · · · · · · ·   |   |
|   |   |

FILING FEE: \$25.00