

L11000037887

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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12 JAN 17 PM 2:05
CLERK OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE

JAN 18 2012

EXAMINER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 10, 2012

GAIL A. ERICKSON
7901 WINTER GARDEN PARKWAY
FT. PIERCE, FL 34951

SUBJECT: SUNRISE SHOWS LLC
Ref. Number: L11000037887

We have received your document for SUNRISE SHOWS LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6984.

Deborah Bruce
Regulatory Specialist II

Letter Number: 712A00000596

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12 JAN 17 PM 2:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Sunrise Shows 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:

GAIL ERICKSON
(Name of Person)

Sunrise Shows LLC
(Firm/Company)

7901 Winter Garden Parkway
(Address)

FL Pierce FL 34951
(City/State and Zip Code)

For further information concerning this matter, please call:

GAIL ERICKSON at (863) 246-5101
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☐ \$0.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$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

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12 JAN 17 PM 2:05

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12 JAN 18 AM 11:32

RECEIVED

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is

Sunrise Shows LLC

2. The Articles of Organization were filed on 3/20/11 and assigned document number

3. The date the dissolution was approved: 12-31-11

4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 608.441, Florida Statutes, (copy 608.441 on back cover letter).

CRAFT Shows promoter - No response

5. CHECK ONE:

☒ All debts, obligations and liabilities of the limited liability company have been paid or discharged.

-OR-

☐ Adequate provision has been made for the debts, obligations and liabilities pursuant to s. 608.4421.

6. All remaining property and assets have been distributed among its members in accordance with their respective rights and interests.

7. CHECK ONE:

☒ There are no suits pending against the company in any court.

-OR-

☐ Adequate provision has been made for the satisfaction of any judgment, order or decree which may be entered against it in any pending suit.

Signatures of the members having the same percentage of membership interests necessary to approve the dissolution:

Signature

Gail Erickson

Printed Name

GAIL ERICKSON

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12 JAN 17 PM 2:05
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TALLAHASSEE, FLORIDA

FILING FEE: \$25.00