

L11000117574

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

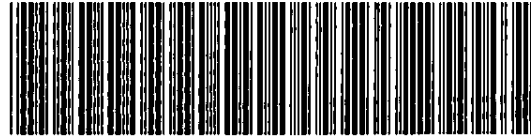
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DEC 14 2011

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11 DEC 12 PM 2:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 3 Suns Studios 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:

Leah McCrum
(Name of Person)

New Jax City Insurance Inc.
(Firm/Company)

9943 Beach Blvd
(Address)

Jacksonville, FL 32246
(City/State and Zip Code)

For further information concerning this matter, please call:

Leah McCrum at (904) 998-1966
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

\$25.00 Filing Fee

30.00 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

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is

3 Suns Studios LLC

2. The Articles of Organization were filed on 10/14/2011 and assigned document number L11000117574

3. The date the dissolution was approved: 11/08/2011

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).

After carefully conducting market research and calculating costs with profit, it was mutually decided the business model/plan would not work in these economic conditions. Both members of organization have concluded best course of action would be to dissolve corporation and not pursue further.

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 [Handwritten Signature]
[Handwritten Signature]

Printed Name

Leah McCrum

Rebecca Weilersbacher

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11 DEC 12 PM 2:35

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FILING FEE: \$25.00