

L11000120128

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

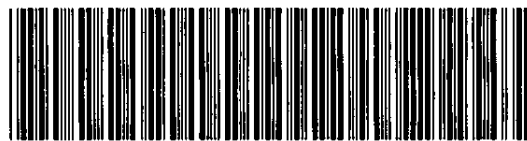
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500256042035

02/04/14--01014--005 **25.00

14 FEB -4 23:10:55
FALLS CHURCH, VA
J. Shivers

J. Shivers FEB 05 2013

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Premiere One Talent Agency, 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:

Heidi Nunes
(Name of Person)

(Firm/Company)

PO Box 692577
(Address)

Orlando FL 32869-2577
(City/State and Zip Code)

Email Heidi.Nunes95@gmail.com

For further information concerning this matter, please call:

Heidi Nunes
(Name of Person)

at (407) 353-2112
(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)

~~Handwritten signature/initials~~

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

Premiere One Talent Agency, LLC.

2. The Articles of Organization were filed on 10/29/2011 and assigned
document number L11000120128

3. The delayed effective date the dissolution if not effective on the date of filing: _____

4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).

A similar talent agency with similar name. Needed to
separate from confusion. Re-licensed with State
under a new name and added as a DBA to a
corporation.

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:

Heidi Nunes
PO Box 692577
Orlando FL 32869-2577

6. Signature of an authorized person or if there are no members, the signature of the person appointed and listed above to wind up the company's activities and affairs:

Signature

Printed Name



Heidi Nunes

FILING FEE: \$25.00

14 FEB -14 11:09:55
STATE
TALLAHASSEE, FLORIDA