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. (	(Requestor's Name)	_		
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PICK-UP	WAIT	MAIL		
· · · · · · · · · · · · · · · · · · ·	(Business Entity Name)			
(Document Number)				
Certified Copies	Certificates of S	Status		
Special Instructions	to Filing Officer:			

Office Use Only



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Knox McLaughlin Gornall & Sennett, P.C. 120 West Tenth Street Erie, Pennsylvania 16501-1461 814-459-2800 814-453-4530 fax www.kmgslaw.com

Nadia A. Havard nhavardækmgslaw.com Licensed in PA and NY

December 14, 2018

Registration Section FL Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

RE: American Homestead Productions, LLC

Dear Sir or Madam:

Please see enclosed the following:

- 1. Cover letter:
- 2. Signed Articles of Dissolution;
- 3. Notice of Limited Liability Company Dissolution:
- 4. A check in the amount of \$25.00

We would appreciate it if you could process the documents and send the confirmation to the undersigned at 120 East 10<sup>th</sup> Street. Erie, PA 16501. If you have any questions, please feel free to contact me at (814) 923-4855.

Very truly yours.

KNOX MCLAUGHEIN GORDALL &

SENNEŢŹ-P.C.

Bv:

Nadia A. Havard, Esq.

NAH

Enclosure

Ce: Timothy Larson (w/enc. via email)

Mary Larson (w/enc. via email)

Karen Benson, CPA, (w/enc. via email)

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#### **COVER LETTER**

TO:

Registration Section Division of Corporations

SUBJECT

#### American Homestead Productions, 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:

# Nadia A. Havard (Name of Person) Knox McLaughlin Gornall & Sennett, PC (Firm/Company) 120 West 10th Street (Address) Erie PA 16501

(City/State and Zip Code)

For further information concerning this matter, please call:

Timothy R. Larson

(Name of Person)

814 \ 450-

(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)

#### 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
	American Homestead Productions, LLC
2.	The Articles of Organization were filed on $\frac{02/23/2012}{}$ and assigned
	document number <u>L12000025901</u>
3.	The delayed effective date the dissolution if not effective on the date of filing:  (effective date cannot be prior to or more than 90 days later than date document is received for filing)  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
4.	A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 05.0707. Florida Statutes, (copy 605.0707 on back cover letter).
	The consent of all the members.
	f there are no members, enter the name and address of the person appointed to wind up the company
	activities and affairs:
	<u>ခြောင်း မြို့မှာ</u> ချော်
6. lis	Signature of an authorized person or if there are no members, the signature of the person appointed and ed above to wind up the company's activities and affairs:
	Timothy R. Larson
	Signature Printed Name

FILING FEE: \$25.00

#### Notice of Limited Liability Company Dissolution

#### NOTE: This page is optional

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company: American Homestead Productions, LLC				
Document number of Limited Liability Company is: L12000025901				
Date of dissolution was: 12/31/2018				
Description of information that must be included in a written claim:				
name, address and the phone number of the creditor, the				
date of the original debt, the amount of the claim, the reason				
for submitting the claim, a written document evidencing the				
original debt.				
~~~				
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)	12 - 12 - 12 - 12 - 12 - 12 - 12 - 12 -			
707 Teal Avenue	1			
Celebration, FL 34747	)  - 			
	•			
A claim against the above named limited liability company will be barred unless a proceeding to enforce the				

claim is commenced within 4 years after the filing of this notice.

Timothy R. Larson

Printed Name of the Person Filing

/Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00