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| (Re | questor's Name) | |
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| (Ad | dress) | |
| (Ad | dress) | |
| (Cit | ry/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Nar | ne) |
| (Do | cument Number) | |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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Office Use Only



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COVER LETTER

| TO: Registration Section Division of Corporations | | | |
|--|--|--|--|
| SUBJECT: PLA ENTERTAIN MENT LL (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: | | | |
| (Name of Person) | | | |
| PLA ENTENTAINMENT, LLC | | | |
| (Firm/Company) | | | |
| 5031 ROBINO CIRCLE | | | |
| (Address) | | | |
| WEST PALM BEACH, FL 334/7 | | | |
| (City/State and Zip Code) | | | |
| For further information concerning this matter, please call: | | | |
| (Name of Person) at (56) 471-7946 (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 | | |
|-----------|--|--|--|
| | PLA ENTERTAINMENT, LLC | | |
| 2. | The Articles of Organization were filed on MAY 03 20/2 and assigned | | |
| | document number <u>4 / 2 0 0 0 0 5 9 9</u> 2 5 | | |
| 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. | 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). | | |
| | I am no longer interested in | | |
| | Continuing with my Corporation. = 5 | | |
| | DEC - | | |
| | | | |
| 5. | If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs: | | |
| | 5031 ROBIND CIRCLE | | |
| | WES PALM BEACH | | |
| | FLORISA 33417 | | |
| 6. lis | Signature of an authorized person or if there are no members, the signature of the person appointed and ted above to wind up the company's activities and affairs: | | |
| | The special sp | | |

FILING FEE: \$25.00

Printed Name

Signature