12000010985

(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:			
[JUL! 1 2013			
L. SELLERS			

Office Use Only



000249408010

07/08/13--01015--015 **25.00

SECRETARY OF STATE

ALLAHASSEE, FLORIDA

FILED

COVER LETTER

Division of Corporations			
SUBJECT: Sunnymaidele Liability Company)			
The enclosed Articles of Dissolution and fee(s) are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
rease return an correspondence concerning and matter to the following.			
Roman ZAK			
(Name of Person)			
Roman ZAK (Name of Person) Sunny mai Dele (Firm/Company)			
O 1 a G			
249 GRanada BIVD			
(Address)			
North Port, FL 34287 (City/State and Zip Code)			
(City/State and Zip Code)			
For further information concerning this matter, please call:			
Roman ZAK at (Mul) 441-8019 (Area Code & Daytime Telephone Number)			
(Name of Person) (Area Code & Daytime Telephone Number)			
Enclosed is a check for the following amount:			
ρ \$25.00 Filing Fee & ρ \$30.00 Filing Fee & ρ \$55.00 Filing Fee & ρ \$60.00 Filing Fee,			
Certificate of Status Certified Copy (additional copy is enclosed) Certificate of Status & Certified Copy (additional copy is enclosed) (additional copy is enclosed)	ed)		

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 Sunnymo	gidele, LLC
2. The Articles of Organization were filed on	5/07/20/2 and assigned document number
3. The date the dissolution was approved:	03/2013
4. A description of occurrence that resulted in the limited 608.441, Florida Statutes, (copy 608.441 on back cove	liability company's dissolution pursuant to section r letter). SOPERG HOW
5. CHECK ONE:	
· -OR-	ited liability company have been paid or discharged.
☐ Adequate provision has been made for the deb	ets, obligations and liabilities pursuant to s. 608.4421.
All remaining property and assets have been distributed rights and interests.	d among its members in accordance with their respective
7. CHECK ONE:	
There are no suits pending against the compan	y in any court.
	sfaction of any judgment, order or decree which may be
Signatures of the members having the same percentage of me	embership interests necessary to approve the dissolution:
Signature	Printed Name
Dorwon Foll	Doman ZAK
1	\$01110N 2910V
·	
	35 00 F
	FI STA
	TATE 3
	DE L