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Gray Robinson

Division of Corporations

No. 0214 P. 1



Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Yvonne Mender
Account Name : GRAY ROBINSON, P.A.
Account Number : 075154001651
Phone : (321)727-8100
Fax Number : (321)984-4122

**LLC DISSOLUTION OR WITHDRAWAL
SOLRISA INN LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

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9/20/18 DS

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Corporate Filing Menu

Help

**ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is

Solrise Inn LLC

2. The Articles of Organization were filed on March 4, 2013 and assigned

document number L13000032846

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 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).

The consent of all members of the Company

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

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:

Charles E. Quinby
Signature

Charles E. Quinby

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: Solrisa Inn LLC

Document number of Limited Liability Company is: L13000032846

Date of dissolution was: upon filing of Articles of Dissolution

Description of information that must be included in a written claim:

1. Name, address, telephone number, fax number and email address of claimant.
2. Amount of claim.
3. If founded on contract or other written instrument, a copy of instrument.
4. Any invoices supporting claim.
5. If founded upon tort, describe facts giving rise to claim.

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

Charles E. Quinby
3223 S. Atlantic Avenue, Unit 405
Cocoa Beach, Florida 32931

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.

Charles E. Quinby

Printed Name of the Person Filing

Charles E. Quinby

Signature of the Person Filing

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