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### **COVER LETTER**

UBJECT:  (Name of Limited Liability Company)  the enclosed Articles of Dissolution and fee(s) are submitted for filing.  lease return all correspondence concerning this matter to the following:  SEPANDAN FARNIA  (Name of Person)  (Firm/Company)  2945 LICHEN LN. UNIT C  (Address)  CLEARWATER, FL 33760  (City/State and Zip Code)  or further information concerning this matter, please call:  SEPANDAN FARNIA  (Name of Person)  (Area Code & Daytime Telephone Number)  nclosed is a check for the following amount:  \$\sum_{\sum_{\text{SEPANDAN}}} \text{ FL and Certificate of Dissolution & Certified Company is personal.}	Div	ision of Corporations			
(Name of Limited Liability Company)  The enclosed Articles of Dissolution and fee(s) are submitted for filing.  Ilease return all correspondence concerning this matter to the following:  SEPANDAN FARNIA  (Name of Person)  (Firm/Company)  2945 LICHEN LN. UNIT C  (Address)  CLEARWATER, FL 33760  (City/State and Zip Code)  or further information concerning this matter, please call:  SEPANDAN FARNIA  (Name of Person)  at (Area Code & Daytime Telephone Number)  nelosed is a check for the following amount:  \$\sum \$255.00\$ Filing Fee, Certificate of Dissolution \$\sum \$555.00\$ Filing Fee, Certificate of Dissolution &	SUBJECT:	SANDFAR STUDIOS LLC			
SEPANDAN FARNIA  (Name of Person)  (Firm/Company)  2945 LICHEN LN. UNIT C  (Address)  CLEARWATER, FL 33760  (City/State and Zip Code)  or further information concerning this matter, please call:  SEPANDAN FARNIA  (Name of Person)  at (Area Code & Daytime Telephone Number)  nclosed is a check for the following amount:  \$\sumset\$ \$25.00 Filing Fee, Certificate of Dissolution &	, court	(Name of Limit	ed Liability Compa	ny)	
SEPANDAN FARNIA  (Name of Person)  (Firm/Company)  2945 LICHEN LN. UNIT C  (Address)  CLEARWATER, FL 33760  (City/State and Zip Code)  or further information concerning this matter, please call:  SEPANDAN FARNIA  (Name of Person)  at (Area Code & Daytime Telephone Number)  nclosed is a check for the following amount:  \$\sumset\$ \$25.00 Filing Fee and Certificate of Dissolution \$\$	The enclosed	1 Articles of Dissolution and fee(s) are submit	ted for filing.		
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2945 LICHEN LN. UNIT C  (Address)  CLEARWATER, FL 33760  (City/State and Zip Code)  or further information concerning this matter, please call:  SEPANDAN FARNIA (Name of Person)  (Area Code & Daytime Telephone Number)  nclosed is a check for the following amount:  \$\sumset\$ \$25.00 Filing Fee and Certificate of Dissolution \$\$55.00 Filing Fee, Certificate of Dissolution &		(Nar	ne of Person)		
2945 LICHEN LN. UNIT C  (Address)  CLEARWATER, FL 33760  (City/State and Zip Code)  or further information concerning this matter, please call:  SEPANDAN FARNIA  (Name of Person)  (Area Code & Daytime Telephone Number)  nclosed is a check for the following amount:  \$\sumset\$ \$25.00 Filing Fee and Certificate of Dissolution \$\$55.00 Filing Fee, Certificate of Dissolution &					
(Address)  CLEARWATER, FL 33760  (City/State and Zip Code)  or further information concerning this matter, please call:  SEPANDAN FARNIA  (Name of Person)  (Area Code & Daytime Telephone Number)  nclosed is a check for the following amount:  \$\sum \text{\$\sum \text{\$\text{\$25.00 Filing Fee} and Certificate of Dissolution}} \text{\$\sum \text{\$\text{\$\text{\$\$}\$}}\$		(Fin	m/Company)	· · · · · · · · · · · · · · · · · · ·	
CLEARWATER, FL 33760  (City/State and Zip Code)  or further information concerning this matter, please call:  SEPANDAN FARNIA  (Name of Person)  (Area Code & Daytime Telephone Number)  nclosed is a check for the following amount:  \$\sum \text{\$\sum \$\text{\$25.00 Filing Fee} and Certificate of Dissolution}} \text{\$\sum \$\text{\$\sum \$\text{\$\text{\$55.00 Filing Fee}, Certificate of Dissolution &}} \$\sum \$\text{\$\tex		2945 LICHEN LN. UNIT C			
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SEPANDAN FARNIA  (Name of Person)  (Name of Person)  (Area Code & Daytime Telephone Number)  **S25.00 Filing Fee and Certificate of Dissolution  **S55.00 Filing Fee, Certificate of Dissolution & S55.00 Filing Fee, Certific		CLEARWATER, FL 33760			
SEPANDAN FARNIA  (Name of Person)  (Area Code & Daytime Telephone Number)  nclosed is a check for the following amount:  \$\sum \text{\$\sum \text{\$\text{\$\text{\$}}}\$} \text{\$\text{\$\text{\$\text{\$}}}\$} \text{\$\text{\$\text{\$\text{\$}}}\$} \text{\$\text{\$\text{\$\text{\$}}}\$} \text{\$\text{\$\text{\$\text{\$}}}\$} \text{\$\text{\$\text{\$\text{\$}}}\$} \text{\$\text{\$\text{\$\text{\$}}}\$} \text{\$\text{\$\text{\$\text{\$}}}\$} \text{\$\text{\$\text{\$\text{\$}}}\$} \text{\$\text{\$\text{\$\text{\$\text{\$}}}\$} \text{\$\text{\$\text{\$\text{\$\text{\$}}}\$} \text{\$\text{\$\text{\$\text{\$\text{\$}}}\$}} \text{\$\text{\$\text{\$\text{\$\text{\$}}}\$} \text{\$\text{\$\text{\$\text{\$\text{\$}}}\$} \$\text{\$\t		(City/Sta	ate and Zip Code)		
(Name of Person)  at (	For further in	nformation concerning this matter, please call:			
(Name of Person) (Area Code & Daytime Telephone Number)  nclosed is a check for the following amount:  ✓ \$25.00 Filing Fee and Certificate of Dissolution \$55.00 Filing Fee, Certificate of Dissolution &	SE	EPANDAN FARNIA		<b>484-3304</b>	
✓ \$25.00 Filing Fee and Certificate of Dissolution  — \$55.00 Filing Fee, Certificate of Dissolution &		(Name of Person)		ode & Daytime Telephone Number)	)
	Enclosed is a	check for the following amount:			
Certified Copy (additional copy is enclosed)	<b>✓ \$25</b> .	.00 Filing Fee and Certificate of Dissolution		g Fee, Certificate of Dissolution & opy (additional copy is enclosed)	

#### **MAILING ADDRESS:**

TO:

Registration Section

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

## FILED

ARTICLES OF DISSOLUTION 2015 FEB 13 AM 11: 02
FOR
A LIMITED LIABILITY COMPANY SECRETARY OF STATE
TALL AHASSEE, FLORIDA

1. The name of a limited lia SANDFAR STUDIOS	SLLC
2. The Articles of Organiza	tion were filed on April 15, 2013 and assigned
document number L130	00056944
3. The delayed effective da (effective da)	te the dissolution if not effective on the date of filing:tive date cannot be prior to or more than 90 days later than date document is received for filing
A description of occurred 605.0707, Florida Statute	nce that resulted in the limited liability company's dissolution pursuant to sec s, (copy 605.0707 on back cover letter).
No revenue and no c	osts for an entire year.
5. If there are no members,	
5. If there are no members, activities and affairs:	enter the name and address of the person appointed to wind up the company' Sepandan Farnia
	• • • • • • • • • • • • • • • • • • • •
	Sepandan Farnia
	Sepandan Farnia 2945 Lichen Ln. Unit C
activities and affairs:  6. Signature of an authorize	Sepandan Farnia  2945 Lichen Ln. Unit C  Clearwater, FL 33760
activities and affairs:  6. Signature of an authorize	Sepandan Farnia  2945 Lichen Ln. Unit C  Clearwater, FL 33760  ed person or if there are no members, the signature of the person appointed an
activities and affairs:  6. Signature of an authorize	Sepandan Farnia  2945 Lichen Ln. Unit C  Clearwater, FL 33760  ed person or if there are no members, the signature of the person appointed an

**FILING FEE: \$25.00**