

614 000 145 231

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

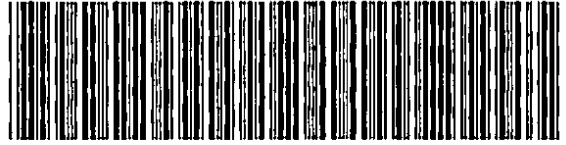
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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04/02/22--01011--002 **25.00

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2022 APR 29 PM 5:01

SECRETARY OF STATE
TALLAHASSEE, FL

Dissolution

MAY 17 2022

D CUSHING

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: S+P Shrauner 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:

Pamela Shrauner
(Name of Person)

(Firm/Company)

8381 Riverdale Ln
(Address)

Champions Gate, FL 33896
(City/State and Zip Code)

For further information concerning this matter, please call:

Pamela Shrauner at (618) 975-8560
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee and Certificate of Dissolution

PAID -

See enclosed letter.

☐ \$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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

SECRETARY OF
TALLAHASSEE
2022 APR 29 PM 5:01

RECEIVED



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

2022 APR 29 AM 7:40

**SECRETARY OF STATE
TALLAHASSEE, FL**

April 19, 2022

**PAMELA SHRAUNER
8381 RIVERDALE LN
CHAMPIONS GATE, FL 33896**

**SUBJECT: S&P SHRAUNER LLC
Ref. Number: L14000145231**

We have received your document for S&P SHRAUNER LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

**Terri J Schroeder
Regulatory Specialist III**

Letter Number: 022A00009108

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

1. The name of a limited liability company is

S + P Shrauner LLC

2. The Articles of Organization were filed on 9/17/2014 and assigned

document number L14000145231

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 LLC only held rental property +

all rental property was sold by Dec

No other assets are held in the LLC.

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:

Pamela Shrauner

Signature

Pamela Shrauner

Printed Name

FILING FEE: \$25.00