Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name

: THERREL BAISDEN, P.A.

Account Number : I20140000065

Phone

: (305)371-5758

Fax Number

: (305)371-3178

LLC DISSOLUTION OR WITHDRAWAL SUN MARINE, LLC

Certificate of Status	0
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Page Count	01
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OCT 3 1 2014

T. HAMPTON

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THERREL

850-811 02/03

COVER LETTER

TO:	Registration Section Division of Corporations			
	SUN MARINE, LLC			
SUBJECT: (Name of Limited Liability Company)				
The encl	losed Articles of Dissolution and fee(s) are submitte	ed for filing.		
Please re	eturn all correspondence concerning this matter to t	he following:		
	Pablo J. Rodriguez	·		
	(Na200	e of Person)		
	Therrel Baisden, PA	·		
	(Firm	n/Company)		
	One S.E. Third Avenue, Stule 2	950		
	(4	Address)		
	Miami, FL 33131			
	(City/Stat	te and Zip Code)		
For further information concerning this matter, please call:				
	Pablo J. Rodriguez	305 371-5758		
	(Name of Person)	(Area Code & Daytime Telephone Number)		
Enclosed	l is a check for the following amount:			
V	\$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	STREET/COURIER ADDRESS: Registration Section		
	Division of Corporations	Division of Corporations		
	P.O. Box 6327 Tallahassee, FL 32314	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 SUN MARINE, LLC
2.	The Articles of Organization were filed on October 7, 2014 and assigned
	document number L14000156507
3.	The delayed effective date the dissolution if not effective on the date of filing:
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). Re-Filing to domesticate
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. lis	Signature of an authorized person or if there are no members, the signature of the person appointed and steed above to wind up the company's activities and affairs:
	Signature Filling FEE: \$25.00 Filling FEE: \$25.00 Filling FEE: \$25.00