L18000135943

| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zɪp/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer |
| |
| |
| |

Office Use Only



600347761816

2929 JUL - 7 All 8: 05 April 20 - 7 111 0: 0:0

O SIMMONS

JUL 0 8 2020

CORPORATION SERVICE COMPANY 1201 Hays Street

XX PLAIN STAMPED COPY

_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Kadesha Roberson - EXT# 62980

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195 REFERENCE AUTHORIZATION COST LIMIT : \$ 25.00 ORDER DATE : July 6, 2020 ORDER TIME : 10:31 AM ORDER NO. : 343624-005 CUSTOMER NO: 4328337 DOMESTIC FILINGS NAME: PON TIKI FRANCHISING, LLC XX ARTICLES OF DISSOLUTION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: _ CERTIFIED COPY

EXAMINER'S INITIALS:

COVER LETTER

Registration Section Division of Corporations

TO:

| SUBJECT: | Pon Tiki Franchising, LLC | | | |
|---|--|---|--------------------------------|--|
| (Name of Limited Liability Company) | | | | |
| | | | | |
| The enclosed | Articles of Dissolution and fee(s) are submi | itted for filing. | | |
| Please return a | all correspondence concerning this matter to | the following: | | |
| | | - | | |
| | Kimberly S. Frie | | | |
| | (Name of Person) | | | |
| | Dentons Cohen & Grigsby PC | | | |
| | (Firm/Company) | | | |
| | 625 Liberty Ave | | | |
| (Address) | | | | |
| | Pittsburgh PA 15222 | | | |
| | | ate and Zip Code) | | |
| | (0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0. | are und 15tp Code) | | |
| For further info | ormation concerning this matter, please call | : | | |
| Kimb | perly S. Frie | 412 | 2974833 | |
| | (Name of Person) | at ((Area Co | de & Daytime Telephone Number) | |
| | | | | |
| | eck for the following amount: | | | |
| ☐ \$25.00 Filing Fee and Certificate of Dissolution | | \$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed) | | |
| | | | | |
| Mailing Address: | | Street Address: | | |
| Registration Section | | Registration Section | | |
| Division of Corporations P.O. Box 6327 | | Division of Corporations | | |
| Tallahassee, FL 32314 | | The Centre of Tallahassee | | |
| Tananassec, 1 E 52514 | | 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 | | |

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANYUL -7 All 8: 05

| 1. | The name of a limited liability company is |
|-----|--|
| | Pon Tiki Franchising, LLC |
| 2. | The Articles of Organization were filed on 05/31/2018 and assigned |
| | document number L18000135943 |
| 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 05.0707, Florida Statutes, (copy 605.0707 on back cover letter). |
| | The consent of all the members. |
| • | The consent of all the members. |
| 5. | If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs: |
| | |
| ibo | Signature of an authorized person or if there are no members, the signature of the person appointed and listed we to wind up the company's activities and affairs: |
| | RAYMOND PRONTO Signature Printed Name |
| | Printed Name |

FILING FEE: \$25.00