# 90001903

| (Requestor's Name)                        |     |  |  |  |
|---|-----|--|--|--|
| (Address)                                 |     |  |  |  |
| (Address)                                 |     |  |  |  |
| (City/State/Zip/Phone #)                  |     |  |  |  |
| PICK-UP WAIT M                            | 4IL |  |  |  |
| (Business Entity Name)                    |     |  |  |  |
| (Document Number)                         |     |  |  |  |
| Certified Copies Certificates of Status _ |     |  |  |  |
| Special Instructions to Filing Officer:   |     |  |  |  |
| J DENNO                                   |     |  |  |  |
| AUG 1 7 2023                              |     |  |  |  |
|   |     |  |  |  |
|   |     |  |  |  |

Office Use Only



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07/14/23--01008--016 \*+25.00

### **COVER LETTER**

Registration Section
Division of Corporations

TO:

| SUBJECT: A  | allen Studio Pictures, LLC                    |                            |   |
|---|---|----------------------------|---|
| _   | (Name of Limit                                | ed Liability Comp          | any)  |
| The enclosed A                                      | articles of Dissolution and fee(s) are submit | ted for filing.            |   |
| Please return al                                    | Il correspondence concerning this matter to   | the following:             |   |
|   | Blase Drotar                                  |                            |   |
|   | (Nai  | ne of Person)              |   |
|   | Drotar Financial Consultants                  |                            |   |
|   | (Fin  | m/Company)                 |   |
|   | 1022 W Germantown Pike                        |                            |   |
|   |   | (Address)                  |   |
|   | Eagleville, PA 19403                          |                            | <u> </u>  |
|   | (City/Sta                                     | ate and Zip Code)          |   |
| For further info                                    | ormation concerning this matter, please call  | :                          |   |
| Blase   | : Drotar                                      | at ( <u>484</u>            | ) 614-0792  |
|   | (Name of Person)                              | (Area                      | Code & Daytime Telephone Number)  |
| Enclosed is a ch                                    | eck for the following amount:                 |                            |   |
| ■ \$25.00 Filing Fee and Certificate of Dissolution |   |                            | ng Fee, Certificate of Dissolution & Copy (additional copy is enclosed) |
| Mailing Address:                                    |   | Street Addre               |   |
| _   | stration Section<br>sion of Corporations      | Registratio<br>Division of | f Corporations  |
|   | Box 6327                                      | The Centre                 | of Tallahassee  |
| Talla   | nhassee, FL 32314                             |                            | onroe Street, Suite 810<br>e, FL 32303                                  |

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

| . Signature<br>bove to wit   | e of an authorized pend up the company  Signature  | s activities and affairs:  Clayton   |  |
|------------------------------|--|--|--|
| 6. Signature                 | nd up the company                                  | s activities and affairs:  | Allen  |
| 6. Signature<br>above to wit | e of an authorized pend up the company             | s activities and affairs:  |  |
| Signatur                     | e of an authorized p                               | CIDON OF IL MICIO MIC NO MICHIDERS!  | and a Summer of the first and the summer of                |
|                              |  | erson or if there are no members, t  | the signature of the person appointed and li               |
|                              |  |  |  |
|                              |  |  |  |
|                              |  |  |  |
|                              | and affairs:                                       | <u> </u>   |  |
| . If there a                 | re no members, ente                                | er the name and address of the per   | son appointed to wind up the company's                     |
|                              | ·  |  |  |
|                              |  |  |  |
| -                            |  |  |  |
| 605.0707,<br>Moved ou        | •  | opy 605.0707 on back cover letter  | r).<br>  |
| . A descrip                  | otion of occurrence t                              | that resulted in the limited liability   | company's dissolution pursuant to section                  |
| Note: If listed as t         | the date inserted in the<br>the document's effecti | is block does not meet the applicable ive date on the Department of State's          | statutory filing requirements, this date will not records. |
|                              |  | e dissolution if not effective on the<br>date cannot be prior to or more than 90 day |  |
| document                     | number L190  | 000 190307   |  |
|                              |  | were filed on <u>07/24/2019</u>  | and assigned   |
|                              | dio Pictures, LLC                                  |  | <u> </u>   |
| Allen Stud                   | dia Diaturas IIC                                   |  |  |

### 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: Allen Studio Pictures LLC   | <del></del>    |
|--|----------------|
| Document number of Limited Liability Company is: L19000190307  |                |
| Date of dissolution was: 12/31/2022  |                |
| Description of information that must be included in a written claim:   |                |
| Moved out of State   |                |
|  |                |
|  | 2023 J         |
|  | <u></u>        |
|  | <u>-</u>       |
|  | T<br>- 23 − 33 |
| Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)  | 1: 29          |
| 1022 W Germantown Pike   |                |
| Eagleville, PA 19403   |                |
|  |                |
|  |                |
|  |                |
| A claim against the above named limited liability company will be barred unless a proceeding to enfectaim is commenced within 4 years after the filing of this notice. | orce the       |
|  |                |
| Blase Drotar Sulling   |                |
| Printed Name of the Person Filing Signature of the Person filing   |                |

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