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	(Requestor's Name)					
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(Business Entity Name)						
(Document Number)						
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## **COVER LETTER**

	gistration Section vision of Corporations						
::::::::::::::::::::::::::::::::::::::	Reindeer Studios LLC						
SUBJECT: (Name of Limited Liability Company)							
he enclose	ed Articles of Dissolution and fee(s) are submit	tted for filing.					
lease retur	n all correspondence concerning this matter to	the following:					
	Kenneth Meyers						
	(Nai	me of Person)					
	(Fir	m/Company)					
	102 Macon Way						
		(Address)					
	St. cloud. FL 34769						
	(City/St	ate and Zip Code)					
or further	information concerning this matter, please call	l:					
K	enneth Meyers	407 744-6722					
_	(Name of Person)	at (					
nclosed is a	t check for the following amount:						
<b>■ \$</b> 2	5.00 Filing Fee and Certificate of Dissolution	☐ \$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)					
<u>M</u> ,	ailing Address:	Street Address:					
Registration Section		Registration Section					
Division of Corporations		Division of Corporations The Centre of Tallahassee					
P.O. Box 6327 Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810					
		Tallahassee FL 32303					

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liabiling Reindeer Studios LLC	ty company is								
2.	The Articles of Organization	were filed on Oct. 15, 2019	)	and assigned						
	document number 1.1900025	8157								
3.	(effective Note: 11 the date inserted in t	(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)  If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be sthe document's effective date on the Department of State's records.								
4.	A description of occurrence 605.0707, Florida Statutes. (	that resulted in the limited leopy 695,0707 on back cov	liability company's (	dissolution pursua	int to section					
	product and services not neede	i			<u>&lt;</u>					
	product and services not needed	l.		_	ECRE FORE	· '				
	product and services not needed				AN 22 P	į. į				
				<u>:</u>	· PR	: P				
5,	If there are no members, ent activities and affairs:	er the name and address of Kenneth Meyers	the person appointed	d to wind up the C	ompany &	Sa <sub>7</sub>				
		102 Macon Way		·						
		St. Cloud. Fl. 34769								
6. al	Signature of an authorized prove to wind up the company	erson or if there are no mer s activities and affairs:	mbers, the signature	of the person appo	ointed and lis	sted				
	Can Thus	1	Conneth Meyers							
_	Signature		Print	ed Name						
		FILING FEE	E: \$25.00							