

L19000304859

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

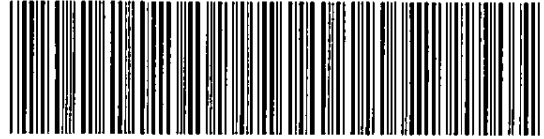
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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TALLAHASSEE, FLORIDA
SECRETARY OF STATE

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TALLAHASSEE, FLORIDA
SECRETARY OF STATE

RECEIVED

Incorporating Services, Ltd.

1540 Glenway Drive
Tallahassee, FL 32301
850.656.7956

Fax: 850.656.7953
www.incserv.com
e-mail: accounting@incserv.com

incserv

ORDER FORM

TO Florida Department of State
The Centre of Tallahassee
2415 North Monroe Street, Suite 810
Tallahassee, FL 32303
corpshelp@dos.myflorida.com
850-245-6051

FROM Melissa Moreau
mmoreau@incserv.com
850.656.7953

REQUEST DATE 8/30/2024

PRIORITY Regular Approval

OUR REF # (Order ID#) 1281336

ORDER ENTITY
PUBLIC HOUSE PICTURES, LLC

PLEASE PERFORM THE FOLLOWING SERVICES:

PUBLIC HOUSE PICTURES, LLC (FL)

File the attached document

NOTES:

\$25.00 Authorized

RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: 120050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,



Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Public House Pictures, LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Statement of Termination and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Colleen Grady

Name of Person

Grady Hunt PLLC

Firm/Company

2525 Ponce de Leon Blvd., Suite 300

Address

Coral Gables, FL 33134

City/State and Zip Code

egrady@gradyhunt.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Colleen Grady

at (305) 539-9082

Name of Person

Area Code Daytime Telephone Number

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

STATEMENT OF TERMINATION

Pursuant to section 605.0709(7), Florida Statutes, I hereby submit the following Statement of Termination:

FIRST: The name of the limited liability company is: Public House Pictures, LLC

SECOND: The Florida Document number of the limited liability company is: L19000304859

THIRD: The date of filing of the initial articles of organization is: 12/20/2019

FOURTH: The date of filing of the dissolution is: August 23, 2024

FIFTH: This limited liability company has completed winding up its activities and affairs and has determined that it will file a statement of termination.

Signed by:
Christopher Irion
Signature of Authorized Representative

Christopher Irion
Typed or printed name of signature

Filing Fee: \$25.00
Certified Copy: \$30.00 (optional)

FILED
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CLERK OF THE
SOLICITOR GENERAL
TALLAHASSEE, FLORIDA