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COVER LETTER

Tallahassee, FL 32314

TO: Registration Section Division of Corporations		
SUBJECT: SUN ISLE Properties, LLC		
(Name of Limited Liability Company)		
The enclosed Articles of Dissolution and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Denny Hamel (Name of Person)		
Sun Isle Properties, UC (Firm/Company)		
PO BOX 10767 (Address) Tampa, FL 33679 (City/State and Zip Code)		
·		
For further information concerning this matter, please call:		
(Name of Person) at (121) 408-43 90 (Area Code & Daytime Telephone Number)		
(Name of Person) (Area Code & Daytime Telephone Number)		
Enclosed is a check 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 SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of Tallahassee		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liability company is Sun Isle Properties LLC
2.	The Articles of Organization were filed on 1112022 and assigned
	document number L 2 2 0 0 0 0 2 4 4 2 5
3.	The delayed effective date the dissolution if not effective on the date of filing: 192024 (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 605.0707, Florida Statutes, (copy 605.0707 on back cover letter). The created the LLC with intent to
	purchase investment properties but due to lack
	of Anances this was not possible. I
	havent made any money so I am dissolving the LLC
5.	If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:
	Jenny Hamel
	PO BOX 10767 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	Tampa, F2 33679: =
6. ab	Signature of an authorized person or if there are no members, the signature of the person appointed and listed ove to wind up the company's activities and affairs:
	Jenny Hamel Printed Name

FILING FEE: \$25.00

Signature