

L22000158601

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

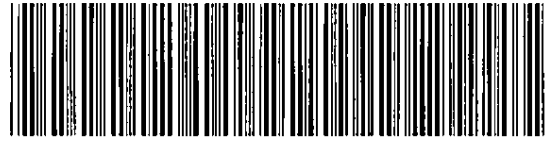
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FL

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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: SUNSET HOME REPAIRS 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:

BRIAN M. WATKINS

\_\_\_\_\_  
(Name of Person)

SUNSET HOME REPAIRS LLC

\_\_\_\_\_  
(Firm/Company)

486 MANAGUA WAY

\_\_\_\_\_  
(Address)

MARY ESTHER, FL. 32569

\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

BRIAN M. WATKINS

\_\_\_\_\_  
(Name of Person)

850

240-7125

at (\_\_\_\_\_) \_\_\_\_\_

(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:**

Registration Section  
Division of Corporations  
P.O. Box 6327

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee

**ARTICLES OF DISSOLUTION  
FOR  
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is  
SUNSET HOME REPAIRS, LLC
  
2. The Articles of Organization were filed on APRIL 01, 2022 and assigned  
document number 1.22000158601
  
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 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).  
The owner decided to dissolve the company through personal decision  
  
The owner decided to dissolve the company through personal decision  
  
The owner decided to dissolve the company through personal decision
  
5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs: BRIAN M. WATKINS  
  
No other members
  
6. Signature of an authorized person or if there are no members, the signature of the person appointed and listed above to wind up the company's activities and affairs:

  
\_\_\_\_\_  
Signature

Brian M. Watkins  
Printed Name

**FILING FEE: \$25.00**