

L22 000 270 574

W

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

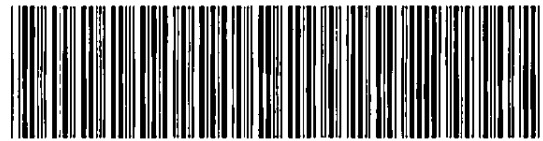
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400424900174

03/11/24--01023--015 **25.00

2024 MAR 22 PM 5:25

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: The Savannah Pictures 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:

Savannah Crossfield

(Name of Person)

The Savannah Pictures LLC

(Firm/Company)

7900 Lime Grove Avenue

(Address)

Melbourne, FL 32904

(City/State and Zip Code)

For further information concerning this matter, please call:

Savannah Crossfield

954

707-0730

(Name of Person)

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
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The 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

The Savannah Pictures LLC

2. The Articles of Organization were filed on 06/14/2022 and assigned

document number L22000270574

3. The delayed effective date the dissolution if not effective on the date of filing: 06/15/2022
(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).

~~Sole owner and operator became a mother and decided to spend all her time with her child instead of on the~~

~~business.~~

Sole owner and [redacted] operator become a mother and decided not
to spend time on the business and dissolve it for family.

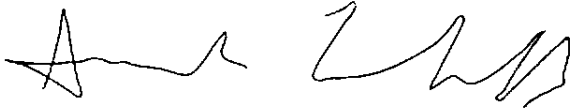
5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:

[redacted] Savannah Crossfield

7900 Lime Grove Avenue

Melbourne, FL 32904

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

Savannah Crossfield

Printed Name

FILING FEE: \$25.00