

L22 000 283 093

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

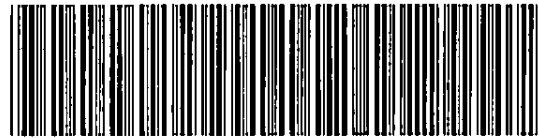
(Document Number)

Certified Copies _____

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TALLAHASSEE, FLORIDA

2024 JAN 18 PM 4:49
SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 3181 SUNRISE, 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:

Kathryn Wood, Esq.

(Name of Person)

Ainsworth & Clancy, PLLC

(Firm Company)

801 Brickell Ave, 8th Fl.

(Address)

Miami, FL 33131

(City/State and Zip Code)

SECRETARY OF STATE
TALLAHASSEE, FL

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FILED

For further information concerning this matter, please call:

Kathryn Wood

305

6003816

(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

3181 SUNRISE, LLC

2. The Articles of Organization were filed on 06/22/2022 and assigned

document number L22000283093

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).

voluntary dissolution by members

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

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:

Kathryn Wood
Signature

Kathryn Wood, Esq. - Legal Representative
Printed Name

FILING FEE: \$25.00

FILED
JUN 19 2022
PM 1:49
TALLAHASSEE, FL
SECRETARY OF STATE

Notice of Limited Liability Company Dissolution

NOTE: This page is optional

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company: 3181 SUNRISE, LLC

Document number of Limited Liability Company is: L22000283093

Date of dissolution was: 01/09/2024

Description of information that must be included in a written claim:

name, address, email, phone number, amount of claim, and facts surrounding claim.

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TALLAHASSEE, FL

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

1100 Brickell Bay Dr. #310747, Miami, FL 33231

A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Kathryn Wood, Esq. - Legal Representative

Printed Name of the Person Filing

Kathryn Wood

Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00