## P21000103696

(Requestor's Name)
(Address)
(Address)
(,
(City/State/Zip/Phone #)
(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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## COVER LETTER 5

Division of Corporations Dissolution of Lee Harris Productions, Inc. SUBJECT: P21000103696 DOCUMENT NUMBER: The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Cherie K Persun (Name of Contact Person) Lee Harris Productions, Inc. (Firm/Company) 4767 New Broad Street (Address) Orlando, FL 32814 (City/State and Zip Code) For further information concerning this matter, please call: at (\_\_\_\_\_) \_\_\_567-6732 Cherie K Persun (Area Code & Daytime Telephone Number) (Name of Contact Person) Enclosed is a check for the following amount: □ \$35 Filing Fee ■ \$43.75 Filing Fee & □ \$43.75 Filing Fee & □ \$52.50 Filing Fee, Certificate of Status Certified Copy Certificate of Status & (Additional copy is Certified Copy enclosed) (Additional copy is enclosed) Mailing Address: Street Address:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

**TO:** Amendment Section

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST:	The name of the corporation as currently filed with the Florida Department of State: Lee Harris Productions, Inc.	
SECOND:	The document number of the corporation (if known):	
THIRD:	The file date of the articles of incorporation:	
FOURTH:	None of the corporation's shares have been issued.	
FIFTH:	No debt of the corporation remains unpaid.	
SIXTH:	The net assets of the corporation remaining after winding up, if any, have been distribute to the shareholders, if shares were issued.	ed
SEVENTH:	A majority of the incorporators or directors authorized the dissolution.	
Sign	ature:  (By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)	
	Cherie K Persun	
	President  (Title of Person Signing)  (Title of Person Signing)	

Filing Fee: \$35

## **Notice of Corporate Dissolution**

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

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

Name of Corporation:	Lee Harris Productions, Inc.
The above named corpora December 31, 2023	ation is the subject of dissolution and the effective date of a dissolution is:
	(date filed with the Dept. if date specified in the Articles of Dissolution)
Description of information	n that must be included in a claim:
All claims against the assets	s of the corporation must be made in writing and include the name of the claimant,
claim amount, basis and original	gination date.
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Mailing address where wr	ritten claims can be sent: (Claims cannot be sent to the Division of Corporations) ando, Florida 32814
A claim against the above within 4 years after the fil	named corporation will be barred unless a proceeding to enforce the claim is commence ing of this notice.
Cherie K Persun	Coul Irsun
Printed N	large of the Person Filing Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00