

L05000021571

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

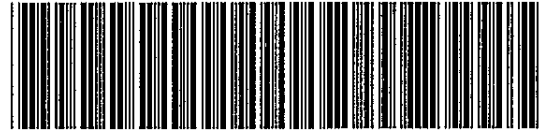
(Document Number)

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L05-21571

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04/05/06--01005--020 \*\*43.75

FILED  
06 APR 19 AM 11:26  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Articles of Dissolution

**DOCUMENT NUMBER:** L05000021571

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Scott MEDRESS

(Name of Contact Person)

National Constructors Inc.

(Firm/Company)

12002 MIRAMAR PARKWAY

(Address)

MIRAMAR, FLORIDA 33025

(City/State and Zip Code)

For further information concerning this matter, please call:

SCOTT MEDRESS

(Name of Contact Person)

at ( 954 ) 443-3060

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$35 Filing Fee

☒ \$43.75 Filing Fee &  
Certificate of Status

☐ \$43.75 Filing Fee &  
Certified Copy  
(Additional copy is  
enclosed)

☐ \$52.50 Filing Fee,  
Certificate of Status &  
Certified Copy  
(Additional copy is  
enclosed)

**MAILING ADDRESS:**

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

**STREET ADDRESS:**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 12, 2006

SCOTT MEDRESS  
NATIONAL CONSTRUCTORS INC.  
12002 MIRAMAR PARKWAY  
MIRAMAR, FL 33028

SUBJECT: MASTER CON II, LLC  
Ref. Number: L05000021571

We have received your document for MASTER CON II, LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You completed the wrong forms.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Neysa Culligan  
Document Specialist

Letter Number: 006A00024800

ARTICLES OF DISSOLUTION  
FOR  
A LIMITED LIABILITY COMPANY

FILED

06 APR 19 AM 11:26

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is

Masker Con II, LLC

2. The Articles of Organization were filed on 03-03-05 and assigned document number

L05000021571

3. The date the dissolution was approved: 04-01-06

4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 608.441, Florida Statutes, (copy 608.441 on back cover letter).

COMPANY NEVER COMMENCED BUSINESS

5. CHECK ONE:

☒ All debts, obligations and liabilities of the limited liability company have been paid or discharged.  
-OR-

☐ Adequate provision has been made for the debts, obligations and liabilities pursuant to s. 608.4421.

6. All remaining property and assets have been distributed among its members in accordance with their respective rights and interests.

7. CHECK ONE:

☒ There are no suits pending against the company in any court.  
-OR-

☐ Adequate provision has been made for the satisfaction of any judgment, order or decree which may be entered against it in any pending suit.

Signatures of the members having the same percentage of membership interests necessary to approve the dissolution:

Signature

[Signature]

Printed Name

DAVID M. HOWELL