

LO6000040458

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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12/29/14--01019--019 \*\*25.00

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14 DEC 29 AM 11:14  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

JAN 09 2015

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** MK ATLANTIC, 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:

TRYFON HRISTOPOULOS

(Name of Person)

HRISTOPOULOS & CO PC

(Firm/Company)

1120 LINCOLN ST STE 1601

(Address)

DENVER, CO 80203

(City/State and Zip Code)

For further information concerning this matter, please call:

TRYFON HRISTOPOULOS

(Name of Person)

303 831-7300

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/COURIER ADDRESS:**

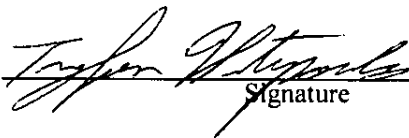
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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

1. The name of a limited liability company is  
MK ATLANTIC, LLC
  
2. The Articles of Organization were filed on 04/19/2006 and assigned  
document number L06000040458
  
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)
  
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 MEMBERS OF THE LIMITED LIABILITY COMPANY VOTED TO  
DISSOLVE THE LIMITED LIABILITY COMPANY

5. If there are no members, enter the name and address of the person appointed to wind up the company's  
activities and affairs: TRYFON HRISTOPOULOS  
1120 LINCOLN ST STE 1601  
DENVER, CO 80203
  
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

TRYFON HRISTOPOULOS  
Printed Name

**FILING FEE: \$25.00**

## 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: MK ATLANTIC, LLC

Document number of Limited Liability Company is: L06000040458

Date of dissolution was: 12/19/2014

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

THE MEMBERS OF THE LIMITED LIABILITY COMPANY HAVE VOTED

TO DISSOLVE THE LIMITED LIABILITY COMPANY AS OF 12/19/2014

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

HRISTOPOULOS & CO PC

1120 LINCOLN ST STE 1601

DENVER, CO 80203

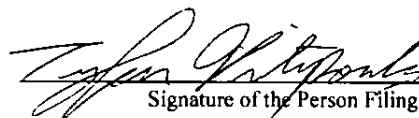
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
14 DEC 29 AM 11:14

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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.

TRYFON HRISTOPOULOS

Printed Name of the Person Filing

  
Signature of the Person Filing

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