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(City/State/Zip/Phone #)		
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(Document Number)		
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M. MILLIGAN JUL 2 5 2017



May 8, 2017

JESUS URDANETA 10305 NW 41ST STREET, SUITE 201 DORAL, FL 33178

SUBJECT: MACIVI HOLDINGS, LLC

Ref. Number: L14000133096

We have received your document for MACIVI HOLDINGS, LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

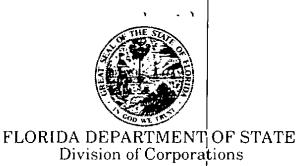
We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6051.

Deborah Bruce Regulatory Specialist II

Letter Number: 217A00009114



June 6, 2017

JESUS URDANETA 10305 NW 41ST STREET, SUITE 201 DORAL, FL 33178

SUBJECT: MACIVI HOLDINGS, LLC

Ref. Number: L14000133096

We have received your document for MACIVI HOLDINGS, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The attached form must be completed in order to file the document.

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) 245-6051.

Deborah Bruce Regulatory Specialist II

Letter Number: 417A00011377

COVER LETTER

TO:

Registration Section

Division of Corporations	
SUBJECT: Maavi Holdings, WC	
(Name of Limited	Liability Company)
The second of the second second for the second seco	for Glina
The enclosed Articles of Dissolution and fee(s) are submitted	for fining.
Please return all correspondence concerning this matter to the	following:
JACUS WIDGING	та
Jesus uidane	(Person)
in the second	
Makin hading	s.uc
10305 NW 41st U	utte, 901
10500 1 0 4, 0	dress)
_	
_ Doral , Fl	33176) nd Zip Code)
(City/State a	ind Zip Code)
For further information concerning this matter, please call:	
TERUS Welcome To	at (305) 466 - 1583
(Name of Person)	(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:	STREET/COURIER ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle
	Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is	17 JUL 24	PH 12: 25
macivi Holdings, LLC	<u> </u>	
2. The Articles of Organization were filed on	and assigned	
document number <u>L 14000133096</u>		
3. The delayed effective date the dissolution if not effective on the (effective date cannot be prior to or more than 90 days Note: If the date inserted in this block does not meet the applicable statisted as the document's effective date on the Department of State's recommendation.	tater than date document is received for filing) tutory filing requirements, this date will not	ı be
 A description of occurrence that resulted in the limited liability c 605.0707, Florida Statutes, (copy 605.0707 on back cover letter). 	 ompany's dissolution pursuant to section 	on
NO Further use by me ingetou	aers I vuluntary	
5. If there are no members, enter the name and address of the perso activities and affairs:	appointed to wind up the company's	
·		
6. Signature of an authorized person or if there are no members, the listed above to wind up the company's activities and affairs:	signature of the person appointed and	
JUly Nighature	Printed Name	
FILING FFF: \$25.00		