L010000 10056

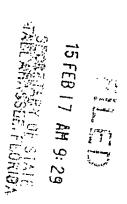
(Re	questor's Name)	·				
(1.5						
(Ad	dress)	· · · · · · · · · · · · · · · · · · ·				
(Ad	ldress)					
(City/State/Zip/Phone #)						
PICK-UP	☐ WAIT	MAIL				
(Bu	isiness Entity Nar	ne)				
(Document Number)						
Certified Copies	Certificates	s of Status				
Special Instructions to	Filing Officer					
opeoidi ilistidottolis to	Timing Ciricon					
		•				

Office Use Only



300269332723

02/17/15--01005--007 **25.00



J. Sincero FEB 2.4 2015

COVER LETTER

	stration Section sion of Corporations						
SUBJECT:	Municipal Asset Software System	s, LLC					
SOBJECT.	(Name of Limit	ed Liability Company)					
The enclosed	Articles of Dissolution and fee(s) are submitt	red for filing.					
Please return a	all correspondence concerning this matter to	the following:					
Thomas P. Malnati, Esq.							
	(Name of Person)						
	(Finn/Company)						
8895 N. Military Trail, Suite 203-D							
	(.	Address)					
	Palm Beach Gardens, FL 3341	0					
(City/State and Zip Code)							
For further inf	ormation concerning this matter, please call:						
Thomas P. Malnati		561 200-8832					
	(Name of Person)	(Area Code & Daytime Telephone Number)					
Enclosed is a ch	neck 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 P.O. Box 6327	Division of Corporations 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 Municipal Asset Software						
2.	The Articles of Organization w	ere filed on 06/21	/2001	and assigned			
	document number L0100001	0056	_				
3.	The delayed effective date the (effective dat	ive 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 505.0707, Florida Statutes, (copy 605.0707 on back cover letter).						
	The consent of all the men	mbers.					
							
				~!			
5.	If there are no members, enter activities and affairs:	the name and addre	ss of the person appointe	d to wind up the cor	mpany's		
	_			5,5	- 1 (man		
					 irr		
		•	•		o T		
			•		2 2		
6. lis	Signature of an authorized perseted above to wind up the compa	son or if there are no any's activities and	o members, the signature affairs:	of the person appoin	nted and		
	T. P. Mahr	h	Thomas P. Maina	ati, Esq.			
Signature		Print	Printed Name				

FILING FEE: \$25.00