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(Req	uestor's Name)	· · · · · · · · · · · · · · · · · · ·		
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SECRUTARY OF STATE
TALL MAY SESSE SERVICES

S. HAWKES

MAR 2 U 2009

EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporations				
SHRI	DECT: MAW CABLE SERVICE,	LLC			
5012		imited Liability Company)			
The e	enclosed Articles of Dissolution and fee(s) are sul	bmitted for filing.			
Please	e return all correspondence concerning this matte	er to the following:			
	Michael D. Weikle				
		(Name of Person)			
	MAW Cable Service, LLC				
	(Firm/Company)				
	8405 Esperanza st				
		(Address)			
	Orlando,FL 3	2817-2441			
	(City	y/State and Zip Code)			
For fi	urther information concerning this matter, please	call:			
	Michael D. Weikle	_{at (} 321	274-5829		
	(Name of Person)		& Daytime Telephone Number)		
Enclo	sed is a check for the following amount:				
\$25	5.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is o	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
	MAILING ADDRESS:		ET/COURIER ADDRESS:		
Registration Section Division of Corporations		Registration Section Division of Corporations			
	P.O. Box 6327	Clifton	Building		
	Tallahassee, FL 32314	2661 E	xecutive Center Circle		

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

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1. The name of a limited liability company is MAW Cable Service, LLC	
	lov. 20,2003 and assigned document number
3. The date the dissolution was approved: Marc	rch 17,2009
	e limited liability company's dissolution pursuant to section ack cover letter).
OR- Adequate provision has been made for	of the limited liability company have been paid or discharged. or the debts, obligations and liabilities pursuant to s. 608.4421. distributed among its members in accordance with their respective
7. CHECK ONE:	
There are no suits pending against the -OR-Adequate provision has been made for entered against it in any pending suit.	or the satisfaction of any judgment, order or decree which may be
gnatures of the members having the same percenta	age of membership interests necessary to approve the dissolution:
Signature	Printed Name
Manuel	Michael D. Weikle

FILING FEE: \$25.00