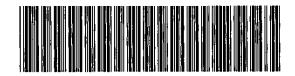
L05000052207

(Requestor's Name)	<u> </u>			
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT	MAIL			
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
DEC 1 % 2012				
S. TONER				

Office Use Only



900241798499

12/17/12--01002--011 **5.00

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TILED

12 DEC 17 PM 4-20

SECRETARY OF STATE

ALL LEVY SEC. F. STATE

ALL LEVY



FLORIDA DEPARTMENT OF STATE Division of Corporations

November 16, 2012

MARK BONDAY MCS SOLUTIONS 10993 BECKLEY PLACE JACKSONVILLE, FL 32246

SUBJECT: MCS SOLUTIONS, LLC

Ref. Number: L05000052207

We have received your document for MCS SOLUTIONS, LLC and check(s) totaling \$20.00. However, the document has not been filed and is being retained in this office for the following reason(s):

There is a balance due of \$5.00. Refer to the attached fee schedule for the breakdown of fees. Please return a copy of this letter to ensure your money is properly credited.

The fee to file your limited liability company document is \$25. Please include an additional \$30 for each certified copy (optional) requested and an additional \$5 for each certificate of status (optional) requested.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Sean Toner Senior Section Administrator

Letter Number: 812A00027696

COVER LETTER

TO: Registration Securo: Division of Corporations
SUBJECT: MCS Solutions (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:
Mark Bonday (Name of Person)
(Name of Person)
(Firm/Company)
10993 Beckley Place
Jackson Te Ft 300 46 (City/State and Zip Code)
For further information concerning this matter, please call:
Mark Bonday at 901, 645-5146 (Name of Person) at (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee Certificate of Status S55.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) 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

FILED

			12	DEC 17	Du , .
The name of a limited liability company is	Mc<	Solution	oc Fat	Callery of	гт 4:20 Беличь
	<u> </u>	2010(10)	13 Hall	W. St.	Figure
2. The Articles of Organization were filed on	May 2	2005	and as	ssigned docu	ment number
L05000052207	1	,			
c	1 1	\sim 1 \sim			
3. The date the dissolution was approved:	10 ⁻⁷	2012	······•		
4. A description of occurrence that resulted in the 608.441, Florida Statutes, (copy 608.441 on be	e limited lial ack cover le	oility company' tter).	s dissolution	pursuant to	section
No longer running boss	iness,	took]	in do	th gra	other
COMPANY					
V					
					· · · · · · · · · · · · · · · · · · ·
5. CHECK ONE: All debts, obligations and liabilities of OR-Adequate provision has been made for 6. All remaining property and assets have been drights and interests. 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 debts, of distributed and distributed a	obligations and mong its member any court.	liabilities puers in accord	ance with the	io 8.4421. fir respective
Signature			Printec	l Name	
MorBud		//	n. L	RI	
10mm Now			Nark	Bonda	7
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