

LO 5000056417

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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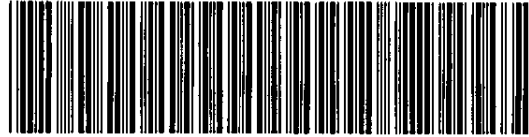
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Givens FEB 11 2015

2/28

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Medici Investments 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:

Chris Robinson
(Name of Person)

(Firm/Company)

1400 N. Mt. Juliet Rd. Suite 200
(Address)

Mt. Juliet TN 37122
(City/State and Zip Code)

For further information concerning this matter, please call:

Chris Robinson at (615) 642-1111
(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:

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

Medici Investments LLC

2. The Articles of Organization were filed on 6-8-2005 and assigned

document number L05000056417

3. The delayed effective date the dissolution if not effective on the date of filing: 2-28-15
(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).

No Longer Doing Business


5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:

Chris Robinson

1400 N. Mt. Juliet Rd Suite 200

Mt. Juliet, TN 37122

6. Signature of an authorized person or if there are no members, the signature of the person appointed as listed above to wind up the company's activities and affairs:


Signature

Chris Robinson
Printed Name

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ALABAMA
FILING

FILING FEE: \$25.00