

LOS 000104709

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

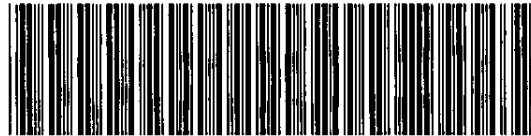
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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01/13/14--01005--020 \*\*25.00

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14 JAN 13 PM 12:37

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

18 Jan 21 2014

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Michelle I. Monnar Enterprises 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:

Michelle Monnar

(Name of Person)

(Firm/Company)

11204 SW 134 Terrace

(Address)

Miami, FL 33176

(City/State and Zip Code)

For further information concerning this matter, please call:

Michelle Monnar

(Name of Person)

at ( 305 ) 321-8812

(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)

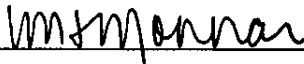
**MAILING ADDRESS:**

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  
Michelle I. Monnar Enterprises, LLC
2. The Articles of Organization were filed on 10/24/2005 and assigned  
document number L05000104709
3. The delayed effective date the dissolution if not effective on the date of 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).  
Business suffered monetary losses.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
5. If there are no members, enter the name and address of the person appointed to wind up the company's  
activities and affairs: Michelle Monnar  
11204 SW 134 Terrace  
Miami, FL 33176  
\_\_\_\_\_
6. Signature of an authorized person or if there are no members, the signature of the person appointed and listed  
above to wind up the company's activities and affairs:
- |  |                        |
|--|------------------------|
| Signature  | Printed Name           |
| <u></u> | <u>Michelle Monnar</u> |

**FILED**  
14 JAN 13 PM 2:37  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**FILING FEE: \$25.00**