## L0600003837

(Req	uestor's Name)	
(Address)		
(Add	ress)	
. (City.	/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Name)	
(Document Number)		
Certified Copies	Certificates of	Status
Special Instructions to Filing Officer:		
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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Tallhassee, FL 3230 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 915758 5028033

AUTHORIZATION : Spelle Bear

COST LIMIT : 4 25.00

ORDER DATE: December 16, 2015

ORDER TIME: 8:39 AM

ORDER NO. : 915758-005

CUSTOMER NO: 5028033

## DOMESTIC FILINGS

NAME: MAGIC PROPERTIES IV LLC

XX\_\_\_ ARTICLES OF DISSOLUTION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams - EXT# 62935

EXAMINER'S INITIALS:

## **COVER LETTER**

TO:

Registration Section Division of Corporations

SUBJECT: Magic Properties IV 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:

Laura D. Brown		
(Name of Person)		
ValleyCrest Companies		
(Firm/Company)		
24151 Ventura Boulevard		
(Address)		
Calabasas, CA 91302		
(City/State and Zip Code)		

For further information concerning this matter, please call:

Laura D. Brown

(Name of Person)

Enclosed is a check for the following amount:

S25.00 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			
	Magic Properties IV LLC			
2.	. The Articles of Organization were filed on January	and assigned		
	document number L06000003837	<del></del>		
3.	(effective date cannot be prior to or n  Note: If the date inserted in this block does not meet t	fective 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) te inserted in this block does not meet the applicable statutory filing requirements, this date will not be cument's effective date on the Department of State's records.		
4.	. A description of occurrence that resulted in the lin 605.0707, Florida Statutes, (copy 605.0707 on back	nited liability company's dissolution pursuant to section k cover letter).		
Pursuant to Section 605.0707(c), the occurence of an event specified in the operating agreement, namely				
	Section 10.1(f). The sale of all or substantially all of the	c assets of the Company.		
5.	. If there are no members, enter the name and address	ss of the person appointed to wind up the company's		
activities and affairs:		0F		
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	<del></del>			
		\$ 55 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
6. lis	. Signature of an authorized person or if there are no sted above to wind up the company's activities and a	o members, the signature of the person appointed and affairs:		
	Chaying M. Sperkin	Charlene M. Sperber, Manager		
	Signature /	Printed Name		

FILING FEE: \$25.00