Lo Lococ 57655

(Requestor's Name)					
(Address)					
(Address)					
(Cit	y/State/Zip/Phone	= #)			
PICK-UP	☐ WAIT	MAIL			
(Bu	siness Entity Nan	ne)			
(Do	cument Number)				
Certified Copies	_ Certificates	s of Status			
Special Instructions to Filing Officer:					
	·				

Office Use Only



400271434824

04/08/15--01012--005 **25.00

15 APR -8 AM 7:51
SECRETARY OF STATE

COVER LETTER

то:	Registration Section Division of Corporations	DATED: April 6, 2015
SUBJEC	CT:MARIANNA AIRPORT PLA	ZA, INC.
	(Name of	Limited Liability Company)
The encl	osed Articles of Dissolution and fee(s) are s	ubmitted for filing.
Please re	eturn all correspondence concerning this man	ter to the following:
	John F. Wendel	
	John IV Wandel	(Name of Person)
	Bennett Jacobs & Ada	оте РА
	Delinete dacobo a ride	(Firm/Company)
	500/ 0 .1 77 .1	- 101
	5304 South Florida A	(Address)
		(Addiess)
	Lakeland, Florida	33813
	(0	City/State and Zip Code)
For first	ner information concerning this matter, pleas	e call·
or turu	or mornation concerning this matter, pleas	c can.
	John F. Wendel	at (863) 644-9911 (Area Code & Daytime Telephone Number)
	(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	STREET/COURIER ADDRESS: Registration Section

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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						
	MARIANNA AIRPORT PLAZA, LLC						
2.	The Articles of Organiza	ation were filed on5-	16-06	and assigned			
	document numberL06	5000053059					
3.	The delayed effective da (effective da (effetive da (effet	ate the dissolution if not extive date cannot be prior to or	effective on the da more than 90 days la	ate of filing: N/A ter than date document is received for the	iling)		
4.	A description of occurre 605.0707, Florida Statuto	nce that resulted in the lies, (copy 605.0707 on ba	imited liability co ck cover letter).	mpany's dissolution pursuant to	section		
	The limited	l [,] liability compan	y disposed o	f all of its assets.	 		
5.	If there are no members,	enter the name and addr	ess of the person	appointed to wind up the compa	ny's		
	activities and affairs:	There are members who will wind-up the company's					
		activities an	activities and affairs.				
				TAPILO	5		
6. lis	Signature of an authoriz sted above to wind up the	ed person or if there are a company's activities and	no members, the s	signature of the person appointe	dand		
C	All L Jaud	bP	John F	. Wendel, Authorized Me	<u>on</u> ember		
7	Signatur	e		Printed Name			

DATED: April 6, 2015 FILING FEE: \$25.00