Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : ROBERT D. ROYSTON, JR., P.A.

Account Number : I20150000047 Phone : (239)205-2225

Fax Number

: (239)205-2016

LLC DISSOLUTION OR WITHDRAWAL MORKEL, LLC

Certificate of Status	0
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APR 0 3 2020

ARTICLES OF DISSOLUTION A LIMITED LIABILITY COMPANY

 The name of a limited liability comp 	any is
Morkel, LLC	
2. The Articles of Organization were fi	led on 10/26/2006 and assigned
document number L06000104225	
(effective date cannot	ution if not effective on the date of filing: or be prior to or more than 90 days later than date document is received for filing) does not meet the applicable statutory filing requirements, this date will not be on the Department of State's records.
 A description of occurrence that resu 605.0707, Florida Statutes, (copy 605 	alted in the limited liability company's dissolution pursuant to section
The consent of the sole member to the fi	ling of Articles of Dissolution.
The consent of the sole member to the fi	<u> </u>
5. If there are no members, enter the na activities and affairs:	ame and address of the person appointed to wind up the company's
Signature of an authorized person or above to wind up the company's activities.	if there are no members, the signature of the person appointed and listed
	JLM Investment Group, LLC, Manager
Signature	By: Jeffrey A. Morrow, its sole Manager Printed Name
/ Signature	Carrege Course

(((H20000099146 3)))

Notice of Limited Liability Company Dissolution

NOTE: This page is optional

This notice is submitted by the dissolved limited liability compunknown claims against this limited liability company as provi		of payment)f
This "Notice of Limited Liability Company Dissolution" is evoluntary dissolution.	optional and is not required when	filing a	;
Name of Limited Liability Company: Morkel, LLC			
Document number of Limited Liability Company is:	4225		-
Date of dissolution was: March 19, 2020			
Description of information that must be included in a written of	claim:		
The full legal name of each claimant. The amount of each claim. A	description of the facts and legal bas	is for each	
claim. The date on which the legal basis for each claim accrued. The	e name, physical address, e-mail add	ress and	
telephone number for each claimant, or the legal representative of ea	ach claimant.		
		11	
Mailing address where claims can be sent: (Claims cannot be s	sent to the Division of Corporation	ons)	
Jeffrey A. Morrow			
P.O. Box 280			
Ducktown, TN 37326			
A claim against the above named limited liability company wi claim is commenced within 4 years after the filing of this notice		to enforce th	e
Jeffrey A. Morrow, Manager of JLM Investment Group, LLC	1.		
Printed Name of the Person Filing	Signature of the Person Fil	ing	

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00