

L06000119519

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617 6383

From:

Account Name : HOLLAND & KNIGHT
Account Number : 072100000016
Phone : (813) 227-8500
Fax Number : (813) 229 0134
Website:

LLC DISSOLUTION OR WITHDRAWAL
MVP-LSI, LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$55.00

RECEIVED

14 OCT 31 AM 10:00

DIVISION OF CORPORATIONS
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

14 OCT 31 PM 12:01

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OCT 31 2014

**ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is
MVP-LSI, LLC
2. The Articles of Organization were filed on December 15, 2006 and assigned
document number L06000119519
3. The delayed effective date the dissolution if not effective on the date of filing: October 31, 2014
(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).
The liquidation and dissolutions was approved by all of the members.
5. If there are no members, enter the name and address of the person appointed to wind up the company's
activities and affairs: n/a
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

Louis T.M. Conti, Authorized Person

Printed Name

FILING FEE: \$25.00

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TALLAHASSEE, FLORIDA

Notice of Limited Liability Company Dissolution**NOTE: This page is optional**

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company: MVP-LSI, LLC

Document number of Limited Liability Company is: L06000119519

Date of dissolution was: October 31, 2014

Description of information that must be included in a written claim:

Name of claimants, date of claim, event giving rise to the claim, amount claimed, and name, address and telephone number of contact to whom the company should reply regarding the claim.

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

Joseph J. Kadow, Esq.

4343 Anchor Plaza Parway, Ste. 1

Tampa, FL 33634

A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Lous T.M..Conti, Authorize Representative

Printed Name of the Person Filing

Signature of the Person Filing

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

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