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COVER LETTER

TO: **Registration Section Division of Corporations**

3 of 5

MK METRO PROPERTIES, LLC SUBJECT: ame 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:

RONNIE / DIC GRIFF (Name of Person)

(Firm/Company) 10690 W. HALIS KIVER RD (Address) HOMOSASSA, FL 34445 (City/State and Zip Code)

For further information concerning this matter, please call:

RON 171C GRIFF at 352, 621-6747 (Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

D \$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 Address:

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

FILED

1. The name of a limited liability company is 21 C 2022 MAY 24 AM 9: 03 PROPER METRO SEURE TARY OF STATE TALLAHASSEE. FL 2. The Articles of Organization were filed on $\underline{Hug22}$, $\underline{2008}$ and assigned document number 4 3. The delayed effective date the dissolution if not effective on the date of filing: $\frac{3/12}{22}$ (effective date cannot be prior to or more than 90 days later than date document is received for filing) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. 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 warehouse that MK Metro Troperties our de therefore the Corporation was dissolved. Was Dolo 5. If there are no members, enter the name and address of the person appointed to wind up the company's PANNIE DICGRIFF activities and affairs: 10690 W HALLS RIVER RD 34448 HomoSASSA

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:

KONNIE MICGRIFF Thur 1

FILING FEE: \$25.00