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| (Requestor's Name) | | | | |
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| (lawson, | | | | |
| | | | | |
| (City/State/Zip/Phone #) | | | | |
| PICK-UP WAIT | MAIL | | | |
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| (Business Entity Name) | | | | |
| | | | | |
| (Document Number) | | | | |
| (======, | | | | |
| 0.45.10.1 | | | | |
| Certified Copies Certificates of Statu | ıs | | | |
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| Special Instructions to Filing Officer: | | | | |
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Office Use Only



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2012 FEB 16 PM 1: 25
SECRETARY OF STATE
SECRETARY OF STATE

J. BRYAN

FEB 1 7 2012

EXAMINER

COVER LETTER

| Division of C | orporations | | | | |
|--|---|---|--|---|--|
| SUBJECT: MA | S FAB, LLC | | | | |
| | (Name of L | imited Liability Company) |) | | |
| | of Dissolution and fee(s) are sul | _ | 2012 FEB 16 PH 1:25 2012 FEB 16 PH 1:25 TALLAHASSEE, FLORIDI | T | |
| Please return all corres | pondence concerning this matte | er to the following: | B 16 | 5 | |
| | ERIC FOX | | | 1 | |
| | | (Name of Person) | FLOT | | |
| | MAS FAB, LLC | | | | |
| | | (Firm/Company) | | | |
| | 965 BUNKER AVENUE | | | | |
| 4, 3-1) | | (Address) | ************************************** | | |
| | GREEN COVE | SPRINGS, FLOR | RIDA 32043 | | |
| | (City | y/State and Zip Code) | | | |
| For further information | concerning this matter, please | call: | | | |
| ERIC | FOX | at (904 | 531-3150 | | |
| . | (Name of Person) | (Area Code | & Daytime Telephone Number) | | |
| Enclosed is a check for th | e following amount: | | | | |
| \$25.00 Filing Fee | 30.00 Filing Fee & Certificate of Status | \$55.00 Filing Fee & Certified Copy (additional copy is e | \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) | | |
| MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | | Registra Divisio Clifton | ET/COURIER ADDRESS: Pation Section On of Corporations Building Executive Center Circle | | |

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

| The name of a limited liability company is MAS FAB, LLC | | SSEE, TO |
|--|--|------------------------------------|
| 2. The Articles of Organization were filed on | 11/7/08 | and assigned document number |
| 3. The date the dissolution was approved:12 | 2/31/11 | <u>-</u> , |
| 4. A description of occurrence that resulted in the 1 608.441. Florida Statutes, (copy 608.441 on bac BUSINESS CLOSED | limited liability company's dissect cover letter). | solution pursuant to section |
| | | |
| 5. CHECK ONE: | | |
| All debts, obligations and liabilities of to Adequate provision has been made for the | | • |
| All remaining property and assets have been dis rights and interests. | tributed among its members in | accordance with their respective |
| 7. CHECK ONE: | | |
| ✓ There are no suits pending against the correction of the correction | • • | nt, order or decree which may be |
| ignatures of the members having the same percentag | e of membership interests nece | essary to approve the dissolution: |
| Signature |) | Printed Name |
| 1111 | ERIC FO | X, MANAGING MEMBER |
| | | |
| | | |
| | | |
| • | **** | |

FILING FEE: \$25.00