

L08000110479

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

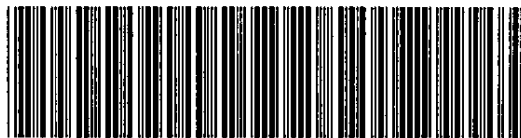
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200256071342

01/30/14--01007--018 **25.00

01/30/14--01007--019 **30.00

JAN 31 2014

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2014 JAN 29 PM 1:03
SECRETARY OF STATE
TALLAHASSEE, FL 32304

FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **MEEKO LLC**

(Name 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:

LESIA DEFELICE

(Name of Person)

(Firm/Company)

352 NW 41 AVE

(Address)

DEERFIELD BEACH, FL 33442

(City/State and Zip Code)

For further information concerning this matter, please call:

LESIA DEFELICE

(Name of Person)

at (**719**) **266-2635**

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

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

SECRET
JAN 29 2014
11:03 AM
FBI - TAMPA

2014 JAN 29 PM 1:03

FILED

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

1. The name of a limited liability company is
MEEKO LLC
2. The Articles of Organization were filed on 12/01/2008 and assigned
document number L08000110479
3. The delayed effective date the dissolution if not effective on the date of 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).

PLANNED EXPIRATION

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:

LESIA DEFELICE

352 NW 41 AVENUE

DEERFIELD BEACH, FL 33442

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

Printed Name

LESIA DEFELICE

FILING FEE: \$25.00

FILED
2014 JAN 29 PM 1:03
SECRETARY OF STATE
TALLAHASSEE, FL 32310