Lo 7600 116129

•				
(Req	uestor's Name)			
(Add	ress)			
(Add	ress)			
(City	/State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	s of Status		
Special Instructions to Filing Officer:				





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500284355485 04/25/16--01021--019 **55,00



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COVER LETTER 🕟 🦠

TO:	Registration Section Division of Corporations			
SUBJE	CT: Montehied Ra LLC (Name of Limited Liability Company)			
The encl	losed Articles of Dissolution and fee(s) are submitted for filing.			
Please re	eturn all correspondence concerning this matter to the following:			
	MARITA B. SCHOLTZ (Name of Person)			
(Name of Person)				
	(Firm/Company)			
	9301 SW 125 TER.			
	9301 Sw 125 TER. (Address) MIAMI, FL 33176 (City/State and Zip Code)			
For furtl	her information concerning this matter, please call:			
	MARITA SCHOLTZ at (828) 346-0855 (Name of Person) (Area Code & Daytime Telephone Number)			
	(Name of Person) (Area Code & Daytime Telephone Number)			
Enclosed	is a check for the following amount:			
[3]	\$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

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited lia	bility company is		
MONTEH	IEDRA, LLC		·
	tion were filed on DEC.	73, 2008 and assig	gned
document number	8000116129		
Note: 11 the date inserted	te the dissolution if not effective of tive date cannot be prior to or more than s in this block does not meet the applic fective date on the Department of Sta	able statutory filing requirement:	30 - 16 received for filing) s, this date will not be
4. A description of occurrer 605.0707, Florida Statutes	nce that resulted in the limited lial s, (copy 605.0707 on back cover l	oility company's dissolution petter).	oursuant to section
SOLD ALL	· · · · · ·	·····	
			at any
		•	ASS. 72.
5. If there are no members.	enter the name and address of the	person appointed to wind un	
activities and affairs:	MARITA B.		55 %
	9301 SW		
	MIAMI, FL	. 33176	·
6. Signature of an authorize listed above to wind up the	ed person or if there are no membe company's activities and affairs:	ers, the signature of the person	n appointed and
Marita B.	Schetta	MARITA B.	SCHOLTZ
Signature		Printed Name	

FILING FEE: \$25.00