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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: MainEHOME, LL	· C
(Name of Li	mited Liability Company)
	5
The enclosed Articles of Dissolution and fee(s) are sub-	mitted for tiling.
Please return all correspondence concerning this matter	r to the following:
Elizabeth	M. Head
	Name of Person)
	(Firm/Company)
e111 5	accepts Od
841 3	(Address)
	orrento Rd. (Address) Wille FL 32207
	//State and Zip Code)
(Chy	78(ate and 7.1p Code)
For further information concerning this matter, please	call:
Elizabeth Head	at (904) 502 - 50 × 8 (Area Code & Daytime Telephone Number)
(Name of Person)	(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	Street Address: Registration Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee 2415 N. Monroe Street, Suite 810
Tallahassee, FL 32314	Tallahassee. FL 32303

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

ì.	The name of a limited liability company is
	MAINE HOME LLC
2.	The Articles of Organization were filed on February 3 2009 and assigned
	document number L0700001120
3.	The delayed effective date the dissolution if not effective on the date of filing: (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 poroperty at 971 Mason Bay Rd., Jonesport ME was
5.	If there are no members, enter the name and address of the person appointed to wind up the company's
	activities and affairs:
6. al	Signature of an authorized person or if there are no members, the signature of the person appointed and listed nove to wind up the company's activities and affairs:
	Signature Elizabeth M. Head Printed Name
	Signature Printed Name

FILING FEE: \$25.00