

L09000032 197

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

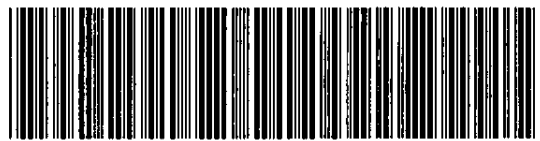
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:
A. LUNT
FEB - 1 2010
EXAMINER

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2010 JAN 29 PM 2:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MICALVAH
(Name of Limited Liability Company)

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

2010 JAN 29 PM 2:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

ALVAH T. WICKBOLDT
(Name of Person)
MICALVAH LLC
(Firm/Company)
1150 FT PICKENS RD UNIT F-1
(Address)
GULF BREEZE, FL 32561
(City/State and Zip Code)

For further information concerning this matter, please call:

ALVAH WICKBOLDT at (225) 921-1022
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- \$25.00 Filing Fee
- \$30.00 Filing Fee & Certificate of Status
- \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$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

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 liability company is

MICALYAH

2. The Articles of Organization were filed on April 2, 2009 and assigned document number

L09000032197

3. The date the dissolution was approved: _____

4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 608.441, Florida Statutes, (copy 608.441 on back cover letter).

WE NEVER USED THIS LLC AND DECIDED
WE WOULD NOT EVER NEED THIS LLC.

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2010 JAN 29 PM 2:04
SECRETARY OF STATE
ALBANY, FLORIDA

5. CHECK ONE:

- All debts, obligations and liabilities of the limited liability company have been paid or discharged.
-OR-
 Adequate provision has been made for the debts, obligations and liabilities pursuant to s. 608.4421.

6. All remaining property and assets have been distributed among its members in accordance with their respective rights and interests.

7. CHECK ONE:

- There are no suits pending against the company in any court.
-OR-
 Adequate provision has been made for the satisfaction of any judgment, order or decree which may be entered against it in any pending suit.

Signatures of the members having the same percentage of membership interests necessary to approve the dissolution:

Signature

Printed Name

Alvan T. Wickboldt

ALVAN T. WICKBOLDT

Michele Wickboldt

MICHELE WICKBOLDT