## L10000046933

equestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
☐ WAIT	MAIL			
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(Document Number)				
Certificates	s of Status			
Special Instructions to Filing Officer:				
	dress)  dress)  y/State/Zip/Phone  WAIT  siness Entity Narr  cument Number)  Certificates			

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SECRETARY OF STATE SECRETARY OF STATE SECRETARY OF STATE OF STATE

J. BRYAN
FEB -1 2011
EXAMINER

TO:

Registration Section

Division	of Corporations			
SUBJECT: M	PE FOUNDATION LLC			
(Name of Limited Liability Company)				
The enclosed Art	icles of Dissolution and fee(s) are sub	omitted for filing.		
Please return all	correspondence concerning this matte	r to the following:		
	TERRIANN MCKENZIE	<del>-</del>		
-		Name of Person)		
		ĵ	75 <b>3</b>	
-	(Firm/Company)		会生て	
			器当下	
	429 LENOX AVE, SUITE P-204			
		,	F 57	
	MIAMI BEACH, FL 33139			
	(City	/State and Zip Code)	D	
For further inform	nation concerning this matter, please	call:		
L. JC	HNSON	at 305 655-0013		
	(Name of Person)	(Area Code & Daytime Telephone Numb	per)	
Enclosed is a check	c for the following amount:			
<b>√</b> \$25.00 Filing Fe	Certificate of Status	S55.00 Filing Fee & S60.00 Filing Certified Copy (additional copy is enclosed) Certified Copy (additional co	Status &	
	MAILING ADDRESS:	STREET/COURIER ADDRESS:		
	Registration Section Registration Section			
	Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building		
	Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301		

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

<ol> <li>The name of a limited liability company is MPE FOUNDATION LLC</li> </ol>	SEE SEE
2. The Articles of Organization were filed on	2010 and assigned document miniber
3. The date the dissolution was approved: 12/31/20	10
4. A description of occurrence that resulted in the limited 608.441, Florida Statutes, (copy 608.441 on back covered by the continue but the statutes of the continue but the co	d liability company's dissolution pursuant to section er letter).  siness entity that has been inactive since
date of organization.	
5. CHECK ONE:	
G-OR-	nited liability company have been paid or discharged.  bts, obligations and liabilities pursuant to s. 608.4421.
<ol><li>All remaining property and assets have been distribute rights and interests.</li></ol>	ed among its members in accordance with their respective
7. CHECK ONE:	mu im amu aquut
<ul> <li>✓ There are no suits pending against the compa         -OR-         Adequate provision has been made for the sate entered against it in any pending suit.</li> </ul>	tisfaction of any judgment, order or decree which may be
Signatures of the members having the same percentage of m	nembership interests necessary to approve the dissolution:
Signature	Printed Name
	Terriann McKenzie, MGMR
· · · · · · · · · · · · · · · · · · ·	
	<u> </u>

**FILING FEE: \$25.00**