

611000141779

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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5

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 515538 7833946

AUTHORIZATION :

COST LIMIT : \$25.00



ORDER DATE : February 25, 2022

ORDER TIME : 2:33 PM

ORDER NO. : 515538-015

CUSTOMER NO: 7833946

DOMESTIC FILINGS

NAME: MC/TSARR MM LLC

XX ARTICLES OF DISSOLUTION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY
_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker - EXT#

EXAMINER'S INITIALS: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MC/TSARR MM 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:

Camilo Miguel, Jr.

(Name of Person)

MC Manager, LLC

(Firm/Company)

2601 S. Bayshore Drive, Ste. 850

(Address)

Miami, FL 33133

(City/State and Zip Code)

For further information concerning this matter, please call:

Camilo Miguel, Jr.

(Name of Person)

at

305

531-2426

(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

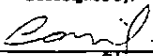
Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

1. The name of a limited liability company is
MC/TSARR MM LLC
2. The Articles of Organization were filed on December 19, 2011 and assigned
document number L11000141779
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).
Pursuant to the Operating Agreement of the Company, the Manager's determination, all assets of the Company
have been sold and all debts of the Company have been paid.

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:
MC Manager, LLC, Manager,
2601 S. Bayshore Drive
Ste. 850, Miami, FL 33133
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:

DocuSigned by:

00977EF6 Signature

Camilo Miguel, Jr., CEO
Printed Name

FILING FEE: \$25.00