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(Requestor's Name)			
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(Ĉity/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
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Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
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SECRETARY OF STATE
PALLAHASSEE FLORIDA

COVER LETTER

TO: Registration Section Division of Corporations

SURJECT: Dicky Magoo, 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:

Esther Hastings, EA

(Name of Person)

E File Florida, LLC

(Firm/Company)

7450 Griffin Rd #170

(Address)

Davie, FL 33314

(City/State and Zip Code)

For further information concerning this matter, please call:

Esther Hastings

954

583-8534

(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 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

	The name of a limited liability company is Dicky Magoo, LLC	·
2.	The Articles of Organization were filed on May	y 24, 2012 and assigned
(locument number L12000070120	
3. 1	The delayed effective date the dissolution if no (effective date cannot be prior to Note: If the date inserted in this block does not me listed as the document's effective date on the Depart	or more than 90 days later than date document is received for filing) tet the applicable statutory filing requirements, this date will not be
4. <i>i</i>	A description of occurrence that resulted in the 05.0707, Florida Statutes, (copy 605.0707 on b	limited liability company's dissolution pursuant to section back cover letter).
C	Company will cease to do business as LLC as agreed	to by all members.
- - 5. I	f there are no members, enter the name and ad-	dress of the person appointed to wind up the company
í	activities and affairs:	AM 7: N
		D A
6. S liste	Signature of an authorized person or if there are above to wind up the company's activities are	e no members, the signature of the person appointed and affairs:
_{	Sohn Hastrin, EA	Esther Hastings, EA
	Signature	Printed Name

FILING FEE: \$25.00