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S. YOUNG

COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT

Melbourne Antique Gallery & More 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:

Rhoda Waxman, MGR

(Name of Person)

Melbourne Antique Gallery & More LLC

(Firm/Company)

417 Oakland Ave

(Address)

Indialantic FL 32903

(City/State and Zip Code)

For further information concerning this matter, please call:

Rhoda Waxman, MGR

_,321

474 2979

(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

1. The name of a limited li	• • •	
Melbourne Antique Galler	y & More LLC	· · · · · · · · · · · · · · · · · · ·
2. The Articles of Organiza	ation were filed on 6/21/20	12 and assigned
document number L 120	00082208	
Note: If the date inserted	anve date cannot be prior to or in	fective on the date of filing: 11/30/2015 ore than 90 days later than date document is received for filing) ne applicable statutory filing requirements, this date will not be ent of State's records.
4. A description of occurre 605.0707, Florida Statute	ence that resulted in the limes, (copy 605.0707 on back	ited liability company's dissolution pursuant to section cover letter).
Closed business		
		1 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3
		72
5. If there are no members, activities and affairs:	enter the name and address	es of the person appointed to wind up the company
417 Oakland Ave		
	Indialntic FL 32903	
6. Signature of an authoriz listed above to wind up the	ed person or if there are no company's activities and a	o members, the signature of the person appointed and affairs:
Chada We	4 FIR	Rhoda Waxman, MGR
' Signatur	re 9	Printed Name

FILING FEE: \$25.00