LADOU	
(Requestor's Name) (Address) (Address)	100292866051
(City/State/Zip/Phone #)	12/05/1601010006 **25.00
(Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	FILED 2016 DEC -5 P 2: 09 SECRETARY OF STATE TALLAHASSEE, FLORIDA
	F STATE FLORIDA
Office Use Only	D. BRUCE Dec 0 & 2016

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FLORIDA DEPARTMENT OF STATE Division of Corporations

November 22, 2016

JAMES WILSON 222 US HIGHWAY 1 STE 4 TEQUESTA, FL 33469

SUBJECT: VALOR MMA LLC Ref. Number: L12000141182

We have received your document for VALOR MMA LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce Regulatory Specialist II

Letter Number: 916A00025066



www.sunbiz.org

Division of Corporations - P.O. BOX 6327 - Tallahassee Florida 32314

COVER LI	ETTER
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TO:	Registration Section	
	Division of Corporations	

VALOR MMA LLC SUBJECT:

(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:

	JAMES WILSON				
	(Name of	Person)		-	
	(l²irm/Co	nipany)	- <u></u>	-	
	222 US HIGHWAY 1	STE 4			
	(Addr	ess)	· · · · · · · · ·	_	
	TEQUESTA FL 3340	39	SEC	2016	
	(City/State and	1 Zip Code)	HA	DEC	Т
For further infor	mation concerning this matter, please call:		SSEE. F	ц Ч	m
JAI	MES WILSON	_{at (} 561	745-01551	ŝ	D
	(Name of Person)		& Davtime Telephone Nun	a b_)	

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 liability company is VALOR MMA LLC
2.	The Articles of Organization were filed on and assigned
I	document number
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 505.0707, Florida Statutes, (copy 605.0707 on back cover letter).
	VALOR MMA LLC HAS DISPOSED OF ALL ASSETS AND CEASED TO OPERATE BUSINESS.
-	
	If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:
	TALLAHASSE
6.	Signature of an authorized person or if there are no members, the signature of the person appointed and ed above to wind up the company's activities and affairs:
list	ed above to wind up the company's activities and affairs: \Box

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Notice of Limited Liability Company Dissolution

NOTE: This page is optional

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company: VALOR MMA LLC	
Document number of Limited Liability Company is: L12000141182	
Date of dissolution was: 11/30/2016	

Description of information that must be included in a written claim:

DATES, AMOUNTS, AND ALL OTHER PERTINENT INFORMATION SUPPORTING ANY OUTSTANDING CLAIM.

	TALL	2016	
	AHA	DEC	
	ASSE	S.	т гп
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Co	r po rati	ions)	D
277 US HIGHWAY 1 STE 4	ORIDA	2:10	

TEQUESTA FL 33469

A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

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JAMES WILSON	
Printed Name of the Person Filing	Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00