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(Requestor's Name)					
(Address)					
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(Address)					
(Cit	y/State/Zip/Phon	e #)			
PICK-UP	☐ WAIT	MAIL			
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(Bu	siness Entity Na	me)			
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(Do	cument Number))			
Certified Copies	_ Certificate:	s of Status			
Special Instructions to	Filing Officer:				
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Office Use Only



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10/27/14--01021--018 **25.00

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SECRETARY OF STAIL
TABLAHASSEL FIRMS



COVER LETTER

	Registration Section Division of Corporations					
SUBJEC	MIRO4,LLC					
	(Name of Limited	Liability Compa	ny)			
The encl	losed Articles of Dissolution and fee(s) are submitted	l for filing.				
Please re	eturn all correspondence concerning this matter to the	e following:				
	Michael J. Sabatello					
	(Name of Person)					
	MIRO4, LLC					
	(Firm/	Company)				
	5610 PGA Blvd. Suite 114					
	(Ac	ldress)				
	Palm Beach Gardens, FL 33418					
	(City/State	and Zip Code)				
For furth	ner information concerning this matter, please call:					
	Michael Sabatello	561	309-1718			
•	(Name of Person)		ode & Daytime Telephone Number)			
Enclosed i	is a check for the following amount:					
1	\$25.00 Filing Fee and Certificate of Dissolution		g Fee, Certificate of Dissolution & lopy (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 MIRO4, LLC							
2.	The Articles of Organization	on were filed on 01/23/2	013	and assigned				
	document number L13000		_					
3.	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)							
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).							
	Business has been closed.							
								
5.	f there are no members, enter the name and address of the person appointed to wind up the company's							
	activities and affairs:	Michael J. Sabatello) 					
				· 				
		5610 PGA Blvd. Suite 114						
		Palm Beach Garde	ns, FL 33418	T4 0				
6. list	Signature of an authorized pred above to wind up the con	person or if there are no n npany's activities and aff	nembers, the signature of tairs:	he person appointed and				
)((0 R				
<i>-</i>	Signature		Michael J. Sabatello Printed N	Jame 50				
	Signature		i iinicu i	733				

FILING FEE: \$25.00