

L17 000094548

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

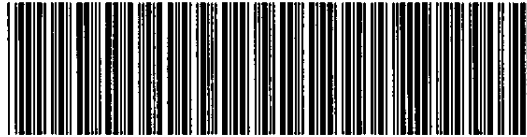
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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01/21/15--01028--008 **25.00

FILED
15 JAN 21 AM 9:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. STEVEN FEB 02 2015

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MIG EXPRESS, 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:

ANDREY USIK

(Name of Person)

MIG EXPRESS, LLC

(Firm/Company)

134 SOUTH DIXIE HWY SUITE 201

(Address)

HALLANDALE BEACH, FL 33009

(City/State and Zip Code)

For further information concerning this matter, please call:

JAKOB FINKELSHTEYN

(Name of Person)

305

at ()

931-9212

(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 liability company is
MIG EXPRESS, LLC
2. The Articles of Organization were filed on 07/02/2013 and assigned
document number L13000094548
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
605.0707, Florida Statutes, (copy 605.0707 on back cover letter).
BUSINESS TURNED OUT NOT TO BE PROFITABLE

5. If there are no members, enter the name and address of the person appointed to wind up the company
activities and affairs: JAKOB FINKELSHEYN
134 SOUTH DIXIE HWY SUITE 201
HALLANDALE BEACH, FL 33009
305-931-9212
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:



Signature

ANDREY USIK

Printed Name

FILING FEE: \$25.00

FILED
15 JAN 21 AM 9:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA