L13000/02691

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Oity/State/ZIDF/Hone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



200336616022

11/12/19--01027--004 ++25.00

2019 NOV 12 AM IO: 3

D138.

DC

COVER LETTER

TO:

Registration Section Division of Corporations

T: Melis Publishing Company 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:

Debra Melisi			
(Name of Person)			
(Firm/Company)			
15298 Lake Wildflower Road			
(Address)			
Delray Beach, FL 33484			
(City/State and Zip Code)			

For further information concerning this matter, please call:

Debra Melisi	at (954) 803-4615	
(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 l	iability company is		
Melis Publishing Compar	ny LLC		 .
2. The Articles of Organiz	ration were filed on 07/19	7/2013	and assigned
document number L130	000102691		
Note: If the date inserted	cuve date cannot be prior to o	t the applicable statutory fi	Filing: November 6, 2019 date document is received for filing) ling requirements, this date will not be
4. A description of occurre 605.0707, Florida Statut	ence that resulted in the less, (copy 605,0707 on ba	imited liability company ick cover letter).	's dissolution pursuant to section
Company has ceased all of	perations and is no longer o	perating in any capacity	^ 2
			2919 NOV
			
	. "		2 AM 10: 3
If there are no members activities and affairs:		ress of the person appoin Lake Wildflower Rd, Delr	ated to wind up the company
			
6. Signature of an authoriz listed above to wind up the	ed person or if there are company's activities and	no members, the signatu l affairs:	re of the person appointed and
Dua min	<u></u>	Debra Melisi	
Signatur	C	1,41	nted Name

FILING FEE: \$25.00