L17000 116968

(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:	7

Office Use Only



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S. YOUNG

SECRETARY OF STATE FALLAHASSEE, FLORIDA

COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT:

6212 Macdill 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:

Andrew Savitt	
(Name of Person)	-
(Firm/Company)	-
4315 W Sylvan Ramble St	16 AUG
(Address)	5 H
Tampa, FL. 33609-4315	16 AUG -1 AM 10: 02
(City/State and Zip Code)	
For further information concerning this matter, please call:	AM 10: 02
Andrew Savitt, H 813 781-4094	ŧ
(Name of Person) (Area Code & Daytime Telephone Num	iber)
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 enclose	

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

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: 6212 Macdill LLC		
Document number of Limited Liability Company is: L13000116968		
Date of dissolution was: 07/01/2016		
Description of information that must be included in a written claim:		
6212 Macdill LLC has been desolved on 07/01	/2016	
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	HAS	도 없는 자구
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	Ö . OR	SIA
	?	<i>y</i> ; · ·
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corpora	itions)	
4315 W Sylvan Ramble St.		
Tampa, Fl. 33609		
,		
A claim against the above named limited liability company will be barred unless a proceedin claim is commenced within 4 years after the filing of this notice.	g to enforce the	e

Printed Name of the Person Filing

Andrew Savitt, H.

Signature of the Ferson Filling