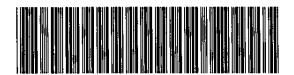
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(Re	questor's Name)			
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PICK-UP	☐ WAIT	MAIL		
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(Do	ocument Number)			
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				





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D. SCOTT NOV 1 0 2016

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: MOCK Enterprises, 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:
Robert W Mock (Name of Person)
Mock Enterprises, LLC (Firm/Company)
606 Crestwood Lane
Holmes Boach FL 34217 (City/State and Zip Code)
For further information concerning this matter, please call:
Robert W Mock at (321) 287-1757 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$15.00 Filling Fee and Certificate of Dissolution \$55.00 Filling Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)
MAILING ADDRESS: STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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 liab	ility company is MOZL F	Enterpris	es ILLC	<u>, </u>
2. The Articles of Organization	on were filed on9	-3-2013	and assigned	
document number	130001245	<u>5</u> 97		
3. The delayed effective date (effective Mote: If the date inserted in listed as the document's effe	this block does not meet the	e applicable statutory fil	iling:	d for filing) date will not be
4. A description of occurrence 605.0707, Florida Statutes,	e that resulted in the limi (copy 605.0707 on back + Needea			int to section
5. If there are no members, en activities and affairs:	\sim	s of the person appoin	· •	ompany's
	606	Crest we	odlani	
	Itel	mes Be	ach FL	<u>-34217</u>
6. Signature of an authorized listed above to wind up the co	person or if there are no impany's activities and a	members, the signatu ffairs:	re of the person appo	ointed and
Signature	Noce_	Rober	+ W M	ock
(FILING 1	FEE: \$25.00		16 NOI SECRE
				702