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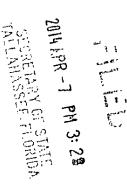
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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APR - 9 2014

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Atlas Funding LLC (Name of Limited Limitity Company)
The enclosed Articles of Dissolution and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Trease retain an eonespondence concerning this matter to the ronormig.
Geoffrey Hoefer (Namb of Person)
(Name of Person)
(Firm/Company)
1700 Meridian Aue., Suite 502
Miami Beach FL 33139 (City/State and Zip Code) For further information concerning this matter, please call:
(City/State and Zip Code)
For further information concerning this matter, please call:
Geoffrey Hoefer at 917 687-8302 (Namu 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 liability company is
	Atlas Funding LLC
2.	The Articles of Organization were filed on $10-3-13$ and assigned
	document number <u>L13000139415</u>
_	
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)
1	
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).
	no longer a going concern
	J J
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Э.	If there are no members, enter the name and address of the person appointed to wind up the company's
	activities and affairs: Geoffrey Hoefer Signature Si
	1700 Mendian Ave #502
	Miami Beach, FL 33139
6.	Signature of an authorized person or if there are no members, the signature of the person appointed and
115	ted above to wind up the company's activities and affairs:
	CI.P. C. nerfor
	Signature Pinted Name

FILING FEE: \$25.00