

L14000044361

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

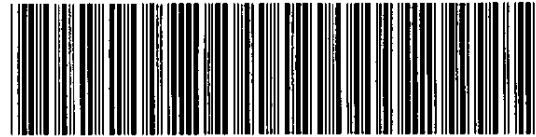
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200273354522

FILED

2015 JUN 22 AM 9:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED

15 JUN 22 AM 11:04

DIVISION OF CORPORATIONS

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 677011 7991121

AUTHORIZATION

COST LIMIT : \$ 55.00

ORDER DATE : June 22, 2015

ORDER TIME : 10:34 AM

ORDER NO. : 677011-030

CUSTOMER NO: 7991121

DOMESTIC FILINGS

NAME: MGA HOLDING FL, LLC

XX ARTICLES OF DISSOLUTION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
 PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams - EXT# 62935

EXAMINER'S INITIALS: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MGA Holding FL, 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:

David A. Rome

(Name of Person)

Mohegan Tribal Gaming Authority

(Firm/Company)

1 Mohegan Sun Boulevard

(Address)

Uncasville, CT 06382

(City/State and Zip Code)

For further information concerning this matter, please call:

David A. Rome

(Name of Person)

at (860) 862-6813

(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

FILED
2015 JUN 22 AM 9:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is

MGA Holding FL, LLC

2. The Articles of Organization were filed on March 18, 2014 and assigned

document number L14000044361

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)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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).

Pursuant to Section 605.0701 (2), the occurrence that resulted in the limited liability company's dissolution

is the consent of all the members.


5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:

David A. Rome

1 Mohegan Sun Boulevard

Uncasville, CT 06382

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

David A. Rome

Printed Name

FILING FEE: \$25.00

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: MGA Holding FL, LLC

Document number of Limited Liability Company is: L14000044361

Date of dissolution was: _____

Description of information that must be included in a written claim:

Parties; Dates; Nature of Claim.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2015 JUN 22 AM 9:14

FILED

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

Mohegan Tribal Gaming Authority

1 Mohegan Sun Boulevard

Uncasville, CT 06382

A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

David A. Rome

Printed Name of the Person Filing



Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00