L14000065418

(Re	questor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	e #)
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COVER LETTER

TO: Registration Section Division of Corporations				
MIES LLC SUBJECT:				
(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:				
ADRIANA CASANAS				
(Name of Person)				
MIES LLC				
(Firm/Company)				
9737 NW 41ST ST STE 982				
(Address)				
DORAL FL 33178				
(City/State and Zip Code)				
For further information concerning this matter, please call:				
ADRIANA CASANAS 786 459-1466				
(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: STREET/COURIER ADDRESS: Pagistration Section Registration Section	,			
Registration Section Registration Section Division of Corporations Division of Corporations				
P.O. Box 6327 Clifton Building Tallahagga, FL 32314 2661 Evacutive Center Circle				

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

I. The name of a limited liability MIES LLC	ompany is
2. The Articles of Organization v	re filed on 04/22/2014 and assigned
document number L1400006	418
3. The delayed effective date the (effective date	issolution if not effective on the date of filing:
4. A description of occurrence th 605.0707, Florida Statutes, (co	resulted in the limited liability company's dissolution pursuant to section 605.0707 on back cover letter).
Resolved, that the affairs	f the company have been concluded.
<u> </u>	debts, obligations and liabilities of the company.
Resolved, that there are r	suits pending against the company.
	\tau !
5. If there are no members, enter	ne name and address of the person appointed to wind up the company's
activities and affairs:	
	SE CO
_	
-	
	_
6. Signature of an authorized per listed above to wind up the compa	on or if there are no members, the signature of the person appointed and sy's activities and affairs:
Iddam (granus	ADRIANA CASANAS
Signature Printed Name	

FILING FEE: \$25.00