L14000065766

| (Re | equestor's Name) | | | |
|---|--------------------|------|--|--|
| (Ac | dress) | | | |
| (Ac | ldress) | | | |
| (Ci | ty/State/Zip/Phone | e #) | | |
| PICK-UP | ☐ WAIT | MAIL | | |
| (Bu | isiness Entity Nar | ne) | | |
| (Document Number) | | | | |
| Certified Copies Certificates of Status | | | | |
| Special Instructions to Filing Officer: | | | | |
| | | į | | |
| | | | | |
| | | | | |
| | | | | |

Office Use Only



000271584840

04/10/15--01006--005 **25.00

15 APR IO PM 3: 02

C.V. 33/5

COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: MABRICO 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:

MRS. MARIBEL CHAFFARDET
(Name of Person)

MABRICO ENTER PRISES LLC
(Firm/Company)

1570 NE 3344 ROAD SUITE 201

(Address)

HOMESTEAD FL 33033
(City/State and Zip Code)

For further information concerning this matter, please call:

MARIBE (CHAFFAR DET at (786) 4736966 (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:

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 | 15 APR 10 | PH 3: 02 | | |
|-----------|---|----------------------|-------------|--|--|
| | MABRICO ENTERPRISES LLC | | | | |
| 2. | The Articles of Organization were filed on APRIL 23, 2014 and ass | igned | | | |
| | document number <u>L 14000065766</u> | | | | |
| 3. | The delayed effective date the dissolution if not effective on the date of filing: API (effective date cannot be prior to or more than 90 days later than date document is | s received for filtr | <u>2015</u> | | |
| 4. | 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). | | | | |
| | THIS IS A USCUNTARY DISSOLUTION | (ccausus | re) | | |
| | OF MABRICO ENTERPRISSES LIC, BECAUSE THE COMPA | any Dio | NOT | | |
| | HAVE ANY ACTIVITY SINCE REGISTRATION OR | AT ANT | TIME | | |
| | SINCE ITS INCEPTION. | | | | |
| 5. | If there are no members, enter the name and address of the person appointed to wind u | ip the company | y's | | |
| | activities and affairs: MARIBEL CHAFFARDE | ET (M | EMBER) | | |
| | | | <u>-</u> | | |
| | | | <u> </u> | | |
| | | | | | |
| 6. lis | Signature of an authorized person or if there are no members, the signature of the person above to wind up the company's activities and affairs: | on appointed a | and | | |
| | | | | | |
| | Signature Printed Name | CHAFFA | RDET | | |
| | - Arginature Printed Name | | | | |

FILING FEE: \$25.00