

L140000 84274

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

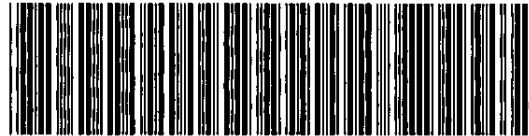
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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STATE OF ARIZONA  
TOLSON

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: The Meagan Group, 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:

Jaselyn Paula  
(Name of Person)

(Firm/Company)

17662 SW 134 CT.  
(Address)

Miami FL 33177  
(City/State and Zip Code)

For further information concerning this matter, please call:

Jaselyn Paula at (786) 449-6278  
(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

The Megan Group, LLC

2. The Articles of Organization were filed on 6/3/2014 and assigned

document number L14000089274

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)

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).

Established The Megan Group, LLC with  
future plans to commence a business. however, I  
will not be doing so at this time, I would like  
to cancel/dissolve this corporation.


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

Jaselyn Paula

17662 SW 134 Court

Miami, FL 33177

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

Jaselyn Paula  
Printed Name

Carlos Ollet

FILING FEE: \$25.00

CARLOS OLLET

FILED  
14 JUL 28 AM 11:06  
CLERK OF DISTRICT COURT  
MIAMI, FL