

L14000149822

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

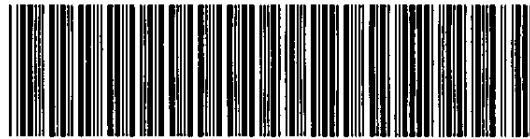
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400266638454

11/24/14--01010--018 **25.00

2014 NOV 24 PM 1:55
SECRETARY OF STATE
SALINAS, CA 94066

FILED

DEC - 4 2014

T CLINE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Meltzer & Miller, 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:

Samuel R. Miller
(Name of Person)

Law offices of Samuel R. Miller
(Firm/Company)

301 Clematis Street, Suite 3000
(Address)

West Palm Beach, FL 33401
(City/State and Zip Code)

2014 NOV 24 PM 1:55
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Samuel R. Miller at (561) 816-0751
(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

Meltzer & Miller, LLC

2. The Articles of Organization were filed on September 24, 2014 and assigned

document number L14000149822

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).

605.0701(2) - The consent of all the members

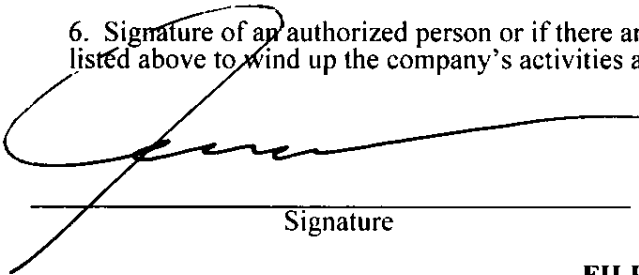
5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:

Samuel R. Miller

301 Clematis Street, Suite 3000

West Palm Beach, FL 33401

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

Samuel Miller

Printed Name

FILING FEE: \$25.00

2014 NOV 24 PM 1:55
CLERK OF DISTRICT COURT
PALM BEACH COUNTY, FLORIDA

FILED