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K. SALY MAR - 6 2017

COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT:

JUGOFRESH MIRACLE MILE 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:

MATTHEW J. SHERMAN (Name of Person)				
(Firm/Company)				
1815 PURDY AVENUE				
(Address)				
MIAMI BEACH, FL 33139				
(City/State and Zin Code)				

For further information concerning this matter, please call:

MATTHEW KRIEGER at (305) 695 - 1950 (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	ILED
ZUITMAR.	-2 4:
SECRETAR TALLAHAR	Y OF STATE EE, FLORIOA
	EE. FLORIDA

1. The name of a limited l	iability company is		TALLAHASSEE, P
JUGOFRESH MIRACLE	MILE LLC		
2. The Articles of Organiz	ation were filed on $\frac{03/2}{}$	24/2015	and assigned
document number L150	00052936		
Note: If the date inserted	ate the dissolution if not etive date cannot be prior to o in this block does not med ffective date on the Depar	effective on the date of filing or more than 90 days later than dat et the applicable statutory filing tment of State's records.	ng: 12/31/2016 e document is received for filing) g requirements, this date will not be
4. A description of occurre 605.0707, Florida Statute	ence that resulted in the es, (copy 605.0707 on b	limited liability company's cack cover letter).	dissolution pursuant to section
AGREED TO CLOSE BU	SINESS.		
If there are no members, activities and affairs:	enter the name and add MATTHEW J. SHE	ress of the person appointed RMAN	to wind up the company's
	1815 PURDY AVE	NUE	
	MIAMI BEACH, FI	_ 33139	
5. Signature of an authorize isted above to wind up the	ed person or if there are company's activities and	no members, the signature of Laffairs:	of the person appointed and
10	_	MATTHEW J. SHERM	AN
Signature		Printer	d Name

FILING FEE: \$25.00