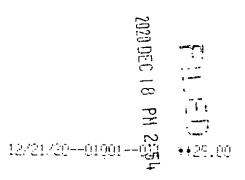
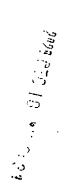


(Requ	estor's Name)				
(Addir	ess)				
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COVER LETTER

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Registration Section

TO:

Division of Corporations						
SUBJECT:	RIECT: MULTHAI RESIDENTIAL GROUP LLC.					
	(Name of Limited Liability Company)					
The enclosed Ar	ticles of Dissolution and fee(s) are submitte	d for tiling.				
Please return all	correspondence concerning this matter to the	ne following:				
		CIA TANNER				
	(Nume	e of Person)				
MULTHAI RESIDENTIAL GROUP LLC.						
	(Firm/Company)					
	500 E. 25TH STREET					
	(Address)					
	SANFOR	RD, FL 32771				
	(City/State	and Zip Code)				
Don Combon to Com	mation concerning this matter, please call:					
Tor further lines	mation concerning this matter, piease can.					
PA	TRICIA TANNER	at (407) 221-2522				
	(Name of Person)	(Area Code & Daytime Telephone Number)				
Enclosed is a chec	k 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)				
	2 Address:	Street Address:				
-	ration Section on of Corporations	Registration Section Division of Corporations				
P.O. Box 6327		The Centre of Tallahassee				
Tallah	assee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

١.	The name of a limited liabili	ty company is				
	MULTHAI RESIDENTIAL GROUP LLC.					
2.	The Articles of Organization	were filed on	08/27/2015	and assigned		
	document numberL1500	00147180				
3.		date cannot be prior to o tis block does not mee	r more than 90 days later than 4 the applicable statutory fi	iling: DECEMBER 1, 2020 date document is received for filing ling requirements, this date will a		
4.	A description of occurrence 605.0707, Florida Statutes, (c	that resulted in the leopy 605,0707 on be	imited liability company ick cover letter).	's dissolution pursuant to sect	ion	
	ECONOMY		<u>.</u>		_	
				2021		
				DE D	G. 241	
				ස		
				P = -	<u>.</u> 	
5.	If there are no members, entractivities and affairs:			ted to wind up the company's		
					_	
					-	
					_	
6. abo	Signature of an authorized pove to wind up the company	erson or if there are s activities and affai	no members, the signaturs:	re of the person appointed and	l liste	
	PAQ					
	SO W \	<u> </u>	PATRICIA TANNER)	
Signature		1,L	nted Name			

FILING FEE: \$25.00