(Re	equestor's Name)					
(Address)						
(Address)						
(Cit	ty/State/Zip/Phon	e #)				
PICK-UP	☐ WAIT	MAIL				
(Business Entity Name)						
(Document Number)						
Certified Copies	_ Certificates	s of Status				
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COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT:

Maurice & Karen Malone Properties 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:

(Name	of Person)
(Firm/	Company)
1414 E. Brainerd St	
(Ac	idress)
Pensacola FI 32503	
(City/State	and Zip Code)

For further information concerning this matter, please call:

Maurice Malone

ູ 601

5275552

(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 Maurice & Karen Malone Properties						
2.	The Articles of Organization	were filed on Nove	ember 20, 2015	_ and assigned			
	document number L1500019	9974	add damain.				
3.	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) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will no listed as the document's effective date on the Department of State's records.						
4.	A description of occurrence 605.0707, Florida Statutes, (that resulted in the l	imited liability company's di	ssolution pursua	ant to section		
	This LLC was never funded.	юру осологог оп ос	ion cover letter).				
5	If there are no members, enter	or the name and add	race of the nouran appointed t	70. 70. 70. 70. 70. 70. 70. 70. 70. 70.	17 ip		
J.	activities and affairs:	Maurice Malone	ress of the person appointed t	o wind up the c	ompany s		
	activities and anairs:			7.7.0			
					4.4		
6. 1:-	Signature of an authorized p	erson or if there are	no members, the signature of	the person app	ointed and		
115	ted above to wind up the com	pany's activities and	a anairs:				
	Manue Ma	lone	Maurice Malone				
	Signature		Printed	Name	-		

FILING FEE: \$25.00