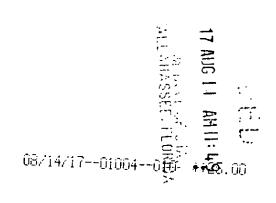


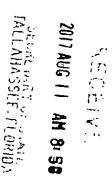
(Requestor's Name)					
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AUG 1 4 2017 Y SULKER

## **COVER LETTER**

TO: Registration Section Division of Corporations								
SUBJECT:	MHR Whaton Ll	C						
(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:								
Michael Repeapert (Name of Person)								
(Name of Person)								
(Firm/Company)								
17576 Scursbale way								
(Address)								
BICA Ratin, F-L 33496								
(City/State and Zip Code)								
For further information concerning this matter, please call:								
	(Name of Person)	at (917) 797 5001						
	(Name of Person)	(Area Code & Daytime Telephone Number)						
Enclosed is a check for the following amount:								
<b>□ \$25.00</b> F	iling Fee and Certificate of Dissolution	□ \$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)						
		Commercial copy (accounts copy to environce)						

## **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  MHR What M	company is				<del></del> ·
2.	The Articles of Organization v		116	and assigne	d	
	document number L16 00	100251++	<del></del>	\		
3.	The delayed effective date the (effective date)  Note: If the date inserted in this listed as the document's effective	e cannot be prior to or mo block does not meet the	ore than 90 days later the applicable statutor;	han date document is rece		
4.	A description of occurrence th 605.0707, Florida Statutes, (co	at resulted in the limi py 605.0707 on back	ited liability compa cover letter).	any's dissolution pur	suant to se	ection
	Nobler used	- not ne	eded		-	_
					- L 33/3	 
5.	If there are no members, enter	the name and addres	s of the person app	ointed to wind up the	e.company	r's
	activities and affairs:	michael	Roppmy	( )	AHII: L	— []
	-	1757	6 SLAVSDEL	<u>cuij</u> L 33496	<u> </u>	_
	_	Boll	- Rulin, F	<u> </u>		
6. lis	Signature of an authorized per sted above to wind up the comp	son or if there are no any's activities and a	members, the sign	ature of the person a	ppointed a	nd
	The state of the s		muh	Printed Name	s.V	_
	Signature			rrinted Name		

FILING FEE: \$25.00