11600039775

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	idress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL.
(Bı	usiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



100311092661

03/30/18--01006 ALLAHASSEE FLORIO

J. HARRIS

COVER LETTER

SUBJECT: MHPG Channelside 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:		
Emmanuel Galanakis (Name of Person)		
MHPG Channelside LLC (Firm/Company)		
PO Box 2633 (Address)		
Dunedin, F1 34697 (City/State and Zip Code)		
For further information concerning this matter, please call:		
Emmanuel Galanakis at (917), 270-8683 (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:

TO:

Registration Section
Division of Corporations

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 MHPG Channelside LLC .
2. The Articles of Organization were filed on $02/25/10$ and assigned
document number <u>L16000397775</u>
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 not be listed as the document's effective date on the Department of State's records.
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).
-all property owned by this business
as residential rentals has been sold and
the bisiness is no longer active
5. If there are no members, enter the name and address of the person appointed to wind up the companies activities and affairs:
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:
Engage and Calacatia
Signature Emmanuel Galanakis Printed Name

FILING FEE: \$25.00