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(Re	questor's Name)			
(Ad	dress)	 		
(Ad	dress)			
(Cit	ty/State/Zip/Phone#	f)		
PICK-UP	☐ WAIT	MAIL		
(Bu	isiness Entity Name)		
(Document Number)				
Certified Copies	_ Certificates o	of Status		
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COVER LETTER

TO:	Registration Section Division of Corporations	
SUBJ	JECT: Dissolution	
5020	(Name of Limited Liability Company)	
The er	enclosed Articles of Dissolution and fee(s) are submitted for filing.	
	se return all correspondence concerning this matter to the following:	
	Joseph Menko	

Joseph Menko	
(Name of Person)	
Menko Ventures LLC	
(Firm/Company)	
2128 Flamingo Place	
(Address)	
Safety Harbor, FL 34695	
(City/State and Zip Code)	

For further information concerning this matter, please call:

Joseph Menko at (727) 3669187
(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 Menko Ventures LLC	ty company is	·		
2.	The Articles of Organization	were filed on 04.13.2016 and assigned			
	document number L1600007	3409	·		
3.	Note: If the date inserted in the	the dissolution if not effective on the date of filing: 02.19.2018 e date cannot be prior to or more than 90 days later than date document is received for filing) this block does not meet the applicable statutory filing requirements, this date will not ctive date on the Department of State's records.			
4.	A description of occurrence 605.0707, Florida Statutes, (that resulted in the limited liability company's dissolution pursuant to sectopy 605.0707 on back cover letter).	tion		
	Never started the business. Nev	er performed any business actions.	-		
5.	If there are no members, ent	er the name and address of the person appointed to wind up the company's Joseph Menko	- - - s		
		2128 Flamingo Place	_		
		Safety Harbor, FL 34695	-		
6. lis	Signature of an authorized pated above to wind up the constitution of the signature of an authorized patential signature.	erson or if there are no members, the signature of the person appointed an apany's activities and affairs: Joseph Menko Printed Name	MA FEB 20		
	/ Significant	FILING FEE: \$25.00	是二:50		