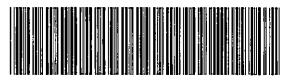
116000116695

(Re	questor's Name)	
(Ad	dress)	
(Add	dress)	
(Cit	y/State/Zip/Phone	. #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Document Number)		
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
	40	185

Office Use Only



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R. \VHITE MAR 0 4 2020 191213-2 AM 10:07

February 17, 2020

JAMES SCHMIDT 443 RONCLAR DR LANCASTER, KY 40444

SUBJECT: MIDNIGHT COVE 456, LLC

Ref. Number: L16000116695

We have received your document for MIDNIGHT COVE 456, LLC and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a LIMITED PARTNERSHIP, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 520A00003500

Rebekah White Regulatory Specialist II Supervisor 2020 FFF 28 PH 2: 18

www.sunbiz.org

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: midnight Cone	456, LLC
(Name of Limited L	naomity Company)
The enclosed Articles of Dissolution and fee(s) are submitted t	or tiling.
Please return all correspondence concerning this matter to the	following:
natalie er	•, ,
James Schm	udt
(Name of	Person)
(Firm/Co	impany)
443 Romelas D	rine
) (Add	ress)
Lancaster, KY	40444
(City/State ar	nd Zip Code)
Part of a late of the state of	
For further information concerning this matter, please call:	. 0
Datalie L. Schmide	ar 513, 652-304'
(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 Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF DISSOLUTION 2020 ICR = 2 AM 10: 07 A LIMITED LIABILITY COMPANY

l.	The name of a limited liability company is Midmight Cove 456, LLC
2.	The Articles of Organization were filed on 10127116 and assigned
	document number <u>68-801710830</u> 8-8
3.	The delayed effective date the dissolution if not effective on the date of filing: 12/31/19 (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).
5.	If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs: **Datable** R. Schmuck**
	Lancaster KY 40444
6. ab	Signature of an authorized person or if there are no members, the signature of the person appointed and listed ove to wind up the company's activities and affairs:
_	ratalie R. Schmidt Natalie R. Schmidt

FILING FEE: \$25.00

Notice of Limited Liability Company Dissolution

NOTE: This page is optional

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company: MUMMYNT COME 456, LLC
Document number of Limited Liability Company is: 068-8017108308-8
Date of dissolution was: 12/31/19
Description of information that must be included in a written claim:
Receipts for work performed
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
443 Ronclar Drive
Lancaster KY 40444

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00

A claim against the above named limited liability company will be barred unless a proceeding to enforce the

claim is commenced within 4 years after the filing of this notice.