

9/19/2018

# 460001873

## Florida Department of State

### Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850) 617-6383

From:

Account Name : INCORP SERVICES INC  
Account Number : I20120000007  
Phone : (702) 866-2500  
Fax Number : (702) 866-2689

### LLC DISSOLUTION OR WITHDRAWAL MAGPIE COLLECTABLES LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

2018 SEP 19 PM 2:52

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Magpie Collectables 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:

Jennifer Sharp

(Name of Person)

InCorp Services, Inc.

(Firm/Company)

3773 Howard Hughes Pkwy. Suite 500S

(Address)

Las Vegas, NV 89169-6014

(City/State and Zip Code)

For further information concerning this matter, please call:

Jennifer Sharp for InCorp Services, Inc.

(Name of Person)

at 800-246-2677

(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

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**ARTICLES OF DISSOLUTION  
FOR  
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is  
Maggie Collectables LLC
2. The Articles of Organization were filed on 09/29/2016 and assigned  
document number L16000181873
3. The delayed effective date the dissolution is 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).  
No longer doing business in Florida.
5. If there are no members, enter the name and address of the person appointed to wind up the company's  
activities and affairs:  
Jennifer Peters  
5376 Oakmont Ct  
North Port, FL 34287
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:

✓ Jennifer Peters  
Signature

Jennifer Peters

Printed Name

FILING FEE: \$25.00

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