## 117000075068

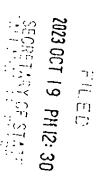
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## **COVER LETTER**

	egistration Section vivision of Corporations				
SUBJEC	MOPHSF Holdings, LLC				
JODJEC	Name of Limited Liability Company				
Dear Sir	or Madam:				
The enclo	osed Statement of Termination and	fee(s) are submi	tted for filing.		
Please re	turn all correspondence concerning	this matter to th	e following:		
Stephen L	. Ruckman				
	Name of Person				
Military O	order of the Purple Heart Service Foundation	on, Inc.			
	Firm/Company				
PO Box 49	)				
	Address				
Annandal	e, Virginia 22003				
	City/State and Zip Code				
sruckman(	@purpleheartfoundation.org				
E-mail a	address: (to be used for future annua	ıl report notifica	tion)		
For furth	er information concerning this matter	er, please call:			
Stephen L	. Ruckman	_ at ()	635-3525		
	Name of Person	Area Code	Daytime Telephone Number		
	lailing Address:	_	Street Address:		
Registration Section			Registration Section		
	vivision of Corporations O. Box 6327		Division of Corporations The Centre of Tallahassee		
	allahassee, FL 32314		rne Centre of Fananassee 2415 N. Monroe Street, Suite 81:		
	ananasee, 1 L 52517		Tallahassee, FL 32303		

## STATEMENT OF TERMINATION

Pursuant to section 605.0709(7), Florida Sta	atutes, I hereby submit the following Statement of Termination:				
FIRST: The name of the limited liability company is: MOPHSF Holdings, LLC					
SECOND: The Florida Document number	of the limited liability company is: L17000075068				
THIRD: The date of filing of the initial art	ticles of organization is: April 3, 2017				
The diffe of ming of the minute and					
FOURTH. The data of Gling of the dissol	ution is: October 10, 2023				
FOORTH: The date of filling of the dissoit	Inon is				
<b>FIFTH:</b> This limited liability company has that it will file a statement of termination.	s completed winding up its activities and affairs and has determined				
Stephen L. Ruckman	Stephen L. Ruckman, CEO of Military Order of the Purple Heart Service Foundation, Inc.				
Signature of Authorized Representative	Typed or printed name of signature				
	Filing Fee: \$25.00				
Cert	tified Copy: \$30.00 (optional)				

CR2E141 (2/14)

2023 OCT 19 PM 12: 30 SECRETARY OF STATE