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(	Requestor's Name)	
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(	City/State/Zip/Phone	<del>#)</del>
PICK-UP	☐ WAIT	MAIL
	Business Entity Name	e)
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Certified Copies	Certificates	of Status
Special Instructions	to Filing Officer:	
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## COVER LETTER

Registration Section Division of Corporations

TO:

•	•	
SUBJECT: M ÜL	LLIS SER	VICES, LLC
	(Name of L	Limited Liability Company)
The enclosed Articles of Disso	dution and fee(s) are sul	bmitted for filing.
Please return all correspondenc	co concerning this mate	or to the following:
r rease return an correspondent	te concerning this matte	of to the following.
M	ICHELLE M	WHH S
		(Name of Person)
		(Firm/Company)
~ ^ ~		
<u>527</u>	2 HATTIE	NOLAN RD (
		(Address)
.D.A	NN =8.1/2/-	E. 330/8
	OD LEBUICO	y/State and Zip Code)
	<b>\-</b>	,
For further information concert	ning this matter, please	call
tor tartier information concern	ming this matter, prease	Can.
M1.11=1.1=	Λα	. 904 716 5090
[National National Na	me of Person)	at ( 904 ) 716 5090 (Area Code & Daytime Telephone Number)
·		,
Enclosed is a check for the followi	ing amount:	
_		\$55.00 Filing Fee, Certificate of Dissolution &
tiz 325.00 i ting i ee and e	ettificate of Dissolution	Certified Copy (additional copy is enclosed)
<b>Mailing Address:</b>		Street Address:
Registration Section		Registration Section
Division of Corpo	rations	Division of Corporations
P.O. Box 6327	2214	The Centre of Tatlahassee
Tallahassee, FL 32	2514	2415 N. Monroe Street, Suite 810
		Tallahassee, FL 32303

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

The name of a limited liability company is	
MIII LIC	
MULLIS SERVICES LLC	
2. The Articles of Organization were filed on APRIL	
7000/8704	
3. The delayed effective day	
3. The delayed effective date the dissolution if not effective on the date of filing: \(\text{\text{\$1600}}\) \(\text{\$1	COTA CONTI.
605.0707. Florida Statutes, (copy 605.0707	t to section
CONTICACTS AND COULD NO	
MARCH 31, 2019. TAXES WERE THE	
5. If there are no members, enter the name and address of the person appointed in activities and so.	
5. If there are no members, enter the name and address of the person appointed to wind up the compactivities and affairs:  MICHELLE ANN MALL	ED.
activities and affairs:	
MICHELLE ANN MULLIS	any's
5272 HATTIE NOLAN RD.	
MIDDLEBURGIFL 32068	
6. Signature of an authorized person or if there are no members, the signature of the person appointed above to wind up the company's activities and affairs:	and lister
	:::
John Mulio	(3)
Signature	5
Printed Name	* <u>-</u>
FILING FEE: \$25.00	O'i
2.3 1 EE; 325,00	P