

L17 000211415

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

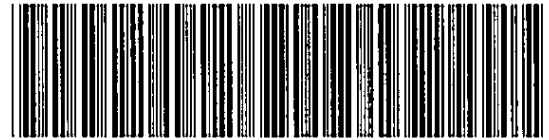
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000364375230

05/17/21--01045--013 **25.00

FILED
2021 MAY 17 PM 6:15
TALLAHASSEE, FL
SOLICITOR GENERAL

ID BRUCE
JUN 17 2021

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MATRIXONESOURCE PEO V 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:

Jamie Hodges

(Name of Person)

MATRIXONESOURCE PEO V LLC

(Firm/Company)

2600 W. Geronimo Pl. Ste 100

(Address)

Chandler, AZ 85224

(City/State and Zip Code)

For further information concerning this matter, please call:

Kara Childress

(Name of Person)

at (

480

) 9932650
(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

525.00 Filing Fee and Certificate of Dissolution

555.00 Filing Fee, Certificate of Dissolution &
Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tulsa, Oklahoma 74116

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2111 E. Tenth Avenue, Suite 200
Tulsa, Oklahoma 74106

2021 MAY 17 PM 6:15
RECEIVED
TULSA
DIVISION OF CORPORATIONS

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

1. The name of a limited liability company is

MATRIXONESOURCE PEO V LLC

2. The Articles of Organization were filed on 10/12/2017 and assigned

document number L17000211415

3. The delayed effective date the dissolution if 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

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:

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:

Kara Childress

Signature

Kara Childress

Printed Name

FILING FEE: \$25.00

2021 MAY 17 PM 6:15
TALLAHASSEE, FL
STATE OF FLORIDA
DEPARTMENT OF STATE

E-11 310