

L17000213767

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

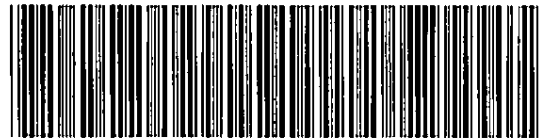
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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300328406853

05/03/19--01021--005 **75.00

APPROVED
AND
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2019 MAY -3 PM 6:27
TOMMY L. GLASS
CLERK OF SUPERIOR COURT
MAY 15 2019

T GLASS

MAY 15 2019

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **MWERX LLC**

(Name of Limited Liability Company)

The enclosed Articles of Dissolution and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

Murray R. Wise

(Name of Person)

(Firm/Company)

4309 Crayton Road

(Address)

Naples, FL 34103

(City/State and Zip Code)

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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For further information concerning this matter, please call:

Murray R. Wise

(Name of Person)

at **239 430-6240**

(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
2601 Executive Center Circle
Tallahassee, FL 32301

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

1. The name of a limited liability company is

MWERX LLC

2. The Articles of Organization were filed on 10/16/2017 and assigned

document number L17000213767

3. The delayed effective date the dissolution if not effective on the date of filing: 12/31/2018
(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).

Business of LLC concluded

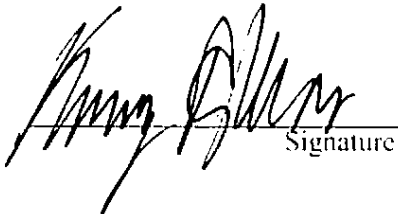
5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:

Murray R. Wise

4309 Crayton Road

Naples, FL 34103

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:



Signature

Murray R. Wise

Printed Name

FILING FEE: \$25.00

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TALLAHASSEE, FLORIDA

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AND
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