118000065749

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP	☐ WAIT	MAIL			
(Bu	isiness Entity Nar	ne)			
(Do	ocument Number)				
Certified Copies	_ Certificates	s of Status			
Special Instructions to Filing Officer:					

Office Use Only



500319733295

10/17/18--01008--017 🚅 •25.00

min net 15 KHID: 31

COVER LETTER

TO:

TO: Registration Section Division of Corporations					
SUBJECT:	Murli Beach LLC				
3000000	(Name of Limited	Liability Company)			
The enclosed	Articles of Dissolution and fee(s) are submitted	1 for filing.			
Please return	all correspondence concerning this matter to the	e following:			
Jeffrey R. Eisensmith, Esquire					
	(Name	of Person)			
	Jeffrey R. Eisensmith	. P.A.			
(Firm/Company)					
	5561 N. Hadronader D	omina Cuita 102			
	5561 N. University D	ddress)			
	Coral Springs, FL 33 (City/State	and Zin Code)			
	Cayrolate	and stiff code)			
For further in	formation concerning this matter, please call:				
<u>Jef</u>	Ef Eisensmith (Name of Person)	at (954) 523-7601 (Area Code & Daytime Telephone Number)			
	(Name of Person)	(Alta Code de Dayanie Perpinsie Politica)			
Enclosed is a c	heck for the following amount:				
X XX 25,0	00 Filing Fee and Certificate of Dissolution	ES55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)			
	MAILING ADDRESS:	STREET/COURIER ADDRESS:			
	Registration Section	Registration Section			
	Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building			
	Tallahassee, FL 32314	2661 Executive Center Circle			

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

2. The Articles of Organization were filed on	3/15/18	and assigned	
document numberL18000065749		. ,	
3. The delayed effective date the dissolution is reflective date cannot be pringle. If the date inserted in this block does no listed as the document's effective date on the E.	or to or more than 90 days later it meet the applicable statutor	than date document/is referred for filing) y filing requirements, this date will not b	ne e
 A description of occurrence that resulted in 605.0707, Florida Statutes, (copy 605.0707 	the limited liability comp on back cover letter).	any's dissolution pursuant to section	19
By consent of all of the	Members		
			5
			057 15 14 15:0
			14 O
 If there are no members, enter the name and activities and affairs: 	d address of the person ap	. , ,	7
activities and arrans.			
·		· · · · · · · · · · · · · · · · · · ·	
	·		
6. Signature of an authorized person or if their	e are no members, the sign	nature of the person appointed and	
listed above to wind up the company's activiti	es and attairs:		
X		N. Shah	

FILING FEE: \$25.00

Printed Name

Signature