Division of Corporations

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : WATSON SLOANE JOHNSON PLLC.

Account Number : 120150000117 : (407)622-6751 Phone

: (866)440-1211 Fax Number

LLC DISSOLUTION OR WITHDRAWAL MAROLD LLC

Certificate of Status	0
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Page Count	02
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September 16, 2019

FLORIDA DEPARTMENT OF STATE
Division of Corporations

MAROLD LLC 9743 COVENT GARDEN DR ORLANDO, FL 32827

SUBJECT: MAROLD LLC REF: L18000086841

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The Notice of Dissolution must contain a description of information that should be included in a written claim.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Karen A Saly Regulatory Specialist II FAX Aud. #: E19000275333 Letter Number: 319A00019079

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liability company is MAROLD LLC
2.	The Articles of Organization were filed on (M/10/2018 and assigned
	document number
3.	The delayed effective date the dissolution if not effective on the date of filing:
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).
	The occurrence that resulted in the limited liability company's dissolution pursuant to Section 605,0701 of the
	Act was the occurrence specified in Section 605.0701(2) - the written consent of all the members of the Company
	to dissolve the company and wind up its affairs.
	<u> </u>
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. lis	Signature of an authorized person or if there are no members, the signature of the person appointed and sted above to wind up the company's activities and affairs:
	Dean Beazant
	Signature Printed Name
	FILING FEE: \$25.00

Notice of Limited Liability Company Dissolution

NOTE: This page is optional

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company: MAROLD LLC	_
Document number of Limited Liability Company is: L18000086841	
Date of dissolution was: September 13, 2019	
Description of information that must be included in a written claim:	
The full legal name and address of the claimant,	—- <u>-</u>
The amount of the claim, and	ري س
A reasonable description of the facts and circumstances surrounding the claim.	- 16 16
	_ []
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) Watson Sloane PLLC	22
Attn: Brian A. Watson, Esq.	
100 S. Orange Avenue, Suite 1400	
Orlando, Florida 32801	
A claim against the above named limited liability company will be harred unless a proceeding to enforce claim is commenced within 4 years after the filing of this notice.	e the
Printed Name of the Person Filing Signature of the Person Filing	

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00