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(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:			

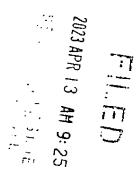
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TO: Registration Section

Division of	Division of Corporations		
SUBJECT:	MM PROFERT	TES AND DEVELOPMENT LLC	
SUBJECT: NAM PROFERTIES AND DEVELOPMENT LLC (Name of Limited Liability Company)			
The enclosed Articles	s of Dissolution and fee(s) are submit	ted for filing.	
Please return all corre	espondence concerning this matter to	the following:	
	MARCO FLORES (Name of Person)		
	(IXII	ne of Person;	
(Firm/Company)			
2425 SW 27 Th AU p.ft. 1008			
	,	(Maries)	
MIAMI FC . 33191 (City/State and Zip Code)			
	' (City/Sta	ate and Zip Code)	
	on concerning this matter, please call		
M	Anto FLOREJ	at (305) 297 - >> 22 (Area Code & Daytime Telephone Number)	
	(Name of Person)	(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:		Street Address:	
Registration Section		Registration Section	
Division of Corporations		Division of Corporations The Centre of Tallahassee	
P.O. Box 6327 Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810	
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