

h21000390741

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

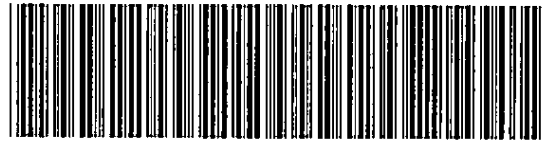
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

JL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: FAMILY MMG DISTRIBUTORS 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:

ALEJANDRO MERCADO

(Name of Person)



(Firm/Company)

17064 SW 90 WAY

(Address)

MAIMI, FL. 33196

(City/State and Zip Code)

For further information concerning this matter, please call:

ALEJANDRO MERCADO

(Name of Person)

786

4980848

at (

_____) _____
(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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

1. The name of a limited liability company is

FAMILY MMG DISTRIBUTORS LLC

2. The Articles of Organization were filed on 09/01/2021 and assigned

document number L21000390741

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)

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 IN 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:



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TALLAHASSEE, FLORIDA