# L22000409910

(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.		
J. HORNE NOV 1 5 2024		

Office Use Only



100434825371

2024 NOV 14 PM 12: 22

2024 NOV 14 PM 2: 46

## CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

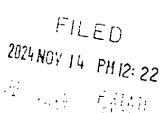
		1
MILE MARKER 5	PROPERTIES, LLC	
Please Debit FCA0	10000003 For: 25	
Thank you Seth Ne	eley	
Stal		Art of Inc. File
		LTD Partnership File
		Foreign Corp. File
		L.C. File
		Fictitious Name File
		Trade/Service Mark
		Merger File
		Art. of Amend. File
		RA Resignation
		Dissolution / Withdrawal
		Annual Report / Reinstatement
		Cert. Copy
		Photo Copy
		Certificate of Good Standing
		Certificate of Status
		Certificate of Fictitious Name
		Corp Record Search
1.		Officer Search
4	7/	Fictitious Search
Signature		Fictitious Owner Search
		Vehicle Search
	<del></del>	Driving Record
Requested by:		UCC 1 or 3 File
Name	Date Time	UCC 11 Search
		UCC 11 Retrieval
Walk-In Themselve SA I	Will Pick Up	Courier

TO:

### **COVER LETTER**

TO:	Registration Section Division of Corporations					
SUBJEC	MILE MARKER 5 PROPERTIES, LLC					
30036		(Name of Limited Liability Company)				
The encl	losed Articles of Dissolution and fee(s) are submi	itted for filing.				
Please re	eturn all correspondence concerning this matter to	o the following:				
	Gregory S. Oropeza, Esq.					
	(Name of Person)					
	Oropeza Stones & Cardenas, PLLC					
	(Firm/Company)					
	221 Simonton Street					
	(Address)					
	Key West, FL 33040					
	(City/S	tate and Zip Code)				
For furth	her information concerning this matter, please cal	1:				
Rae Burns		305 294-0252 at ()				
	(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 Division of Corporations	Registration Section Division of Corporations				
	P.O. Box 6327	The Centre of Tallahassee				
Tallahassee, FL 32314		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 MILE MARKER 5 PROPERTIES, LLC		. 💥		- FARA
2.	The Articles of Organization were filed on	November 3, 2022	and as	signed	
	document number L22000469996				
3.	The delayed effective date the dissolution if (effective date cannot be prior Note: If the date inserted in this block does not listed as the document's effective date on the Delayer.	r to or more than 90 days later than date t meet the applicable statutory filing	document	is received ents, this d	for filing) late will not be
4,	A description of occurrence that resulted in t 605.0707, Florida Statutes. (copy 605.0707 o	the limited liability company's don back cover letter).	issolutio	n pursuan	t to section
	The company has closed and is no longer conduc	cting business.			
	The company has closed and is no longer conduc	eting business.			
	The company has closed and is no longer conduct	ting business.	<del></del>		
5.	If there are no members, enter the name and activities and affairs:	address of the person appointed	to wind	up the cor	mpany's
		_			
6. ab	Signature of an authorized person or if there ove to wind up the company's activities and a	are no members, the signature caffairs:	of the pers	son appoi	nted and listed
D	locuSigned by:				
Ry	an Schannowske	Ryan Scharnowske			
<u> </u>	Signature	Printe	d Name		

FILING FEE: \$25.00

TO:

#### **COVER LETTER**

	Registration Section Division of Corporations				
SUBJEC <sup>*</sup>	MILE MARKER 5 PROPERTIES, LLC				
0000110	(Name of Limited Liability Company)				
The enclo	sed Articles of Dissolution and fee(s) are submi	tted for filing.			
Please reti	urn all correspondence concerning this matter to	the following:			
	Gregory S. Oropeza, Esq.				
	(Na	me of Person)			
	Oropeza Stones & Cardenas, PLLC				
	(Firm/Company)				
	221 Simonton Street				
	(Address)				
	Key West, FL 33040				
	(City/St	ate and Zip Code)			
For furthe	r information concerning this matter, please call	;;			
Rae Burns		305 294-0252 at ( )			
_	(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)			
	lailing Address:	Street Address:			
	Registration Section	Registration Section			
	Division of Corporations P.O. Box 6327	Division of Corporations The Centre of Tallahassee			
	allahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			