## P090000998aa

(Re	equestor's Name)	
(ITC	equestor s rearries	
(Ad	ldress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies Certificates of Status		
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Special Instructions to	Filing Officer:	
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## **COVER LETTER**

TO: Amendment Section

Division of Corporations
SUBJECT: Dissolution of Corporation
OOCUMENT NUMBER: <u>209000099822</u>
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Kulani Gelardi
(Name of Contact Person)
MKM Inc (Firm/Company)
(Firm/Company)
3599 N Fed Hwy (Address)
(Address)
Fort Land FL 33308 (City/State and Zip Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
Kulani Celardi at (954) 563-3272  (Area Code & Davring Telephone Number)
(Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
□\$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee,  Certificate of Status Certified Copy (Additional copy is enclosed)  □\$52.50 Filing Fee,  Certificate of Status & Certified Copy (Additional copy is enclosed)
MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle

Tallahassee, FL 32301

## ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST:	The name of the corporation as currently filed with the Florida Department of	State:		
	MKM Inc			
SECOND:	The document number of the corporation (if known): 70900099832			
THIRD:	The date dissolution was authorized: 3/1/2015			
	Effective date of dissolution if applicable:	file date)	-	
FOURTH:	Adoption of Dissolution (CHECK ONE)			
	Dissolution was approved by the shareholders. The number of votes cast f was sufficient for approval.	or dissolution	o <b>n</b>	
	☐ Dissolution was approved by the shareholders through voting groups.			
	The following statement must be separately provided for each voting group ento vote separately on the plan to dissolve:	ıtitled		
	The number of votes cast for dissolution was sufficient for approval by	ਹੀਂ	型 表,	
	Board of Directors	===		
	(voting group)	οο <sub>222</sub>		
\$	Signature:  (By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by	AH 9: 56	Section of Trace	
	that fiduciary)			
	Mireille ? Thornton			
	(Typed or printed name of person signing)			
	President			
	(Title of person signing)			

Filing Fee: \$35