



Form Revision Date 07/2016

### CERTIFICATE OF DISSOLUTION

For use by DOMESTIC LIMITED LIABILITY COMPANY

*Pursuant to the provisions of Act 23, Public Acts of 1993, the undersigned limited liability company executes the following Certificate of Dissolution:*

The identification number assigned by the Bureau is:	<input type="text" value="801578378"/>
The name of the limited liability company is:	<input type="text" value="CANTON CROSSING, LLC"/>

The reason for dissolution is upon unanimous vote.

This document must be signed by a member, manager, or an authorized agent:  
Signed this 13th Day of December, 2018 by:

Signature	Title	Title if "Other" was selected
David S Przygoda	Member	

By selecting ACCEPT, I hereby acknowledge that this electronic document is being signed in accordance with the Act. I further certify that to the best of my knowledge the information provided is true, accurate, and in compliance with the Act.

Decline     Accept

***MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS***  
***FILING ENDORSEMENT***

***This is to Certify that the*** CERTIFICATE OF DISSOLUTION

***for***

CANTON CROSSING, LLC

***ID Number:*** 801578378

***received by electronic transmission on*** December 13, 2018 ***, is hereby endorsed.***

***Filed on*** December 14, 2018, ***by the Administrator.***

***The document is effective on the date filed, unless a subsequent effective date within 90 days after received date is stated in the document.***



***In testimony whereof, I have hereunto set my hand and affixed the Seal of the Department, in the City of Lansing, this 14th day of December, 2018.***

***Julia Dale, Director***

***Corporations, Securities & Commercial Licensing Bureau***