# 01001000000

(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:

L. SELLERS

FEB - 8 2010

**EXAMINER** 

Office Use Only



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02/05/10 -01022--003 \*\*30.00

10 FEB -5 PM 1: 21
SECRETARY OF STATE

## **COVER LETTER**

TO:		ation Section on of Corporations		
SUBJE	<sub>CT:</sub> K	APYDERM, LLC		
		(Name of	Limited Liability Company)	
The one	Jacad A.	rticles of Dissolution and fee(s) are s	uhmittad for filing	
			<u>-</u>	
Please re	eturn all	correspondence concerning this mat	tter to the following:	
		RUDY RODRIGUEZ		
			(Name of Person)	
		KAPYDERM, LLC		
			(Firm/Company)	
10927 SOUTHWEST 137TH PLACE				
			(Address)	<del></del>
		MIAMI FL 33186		
		(C	ity/State and Zip Code)	
For furt	her info	rmation concerning this matter, pleas	se call:	
	RUE	Y RODRIGUEZ	at ( 305 ) 772-2	2512
		(Name of Person)	(Area Code & Daytime	e Telephone Number)
Enclosed	is a chec	ck for the following amount:		
\$25.00	0 Filing F	See 30.00 Filing Fee & Certificate of Status	\$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

#### MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

## STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

# ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is		
2. The Articles of Organization were filed on L02000010010	2002 and assigned document nun	nber
3. The date the dissolution was approved: 12/31/20	09	
4. A description of occurrence that resulted in the limite 608.441, Florida Statutes, (copy 608.441 on back cov	d liability company's dissolution pursuant to section er letter).	
For the past few years the monthly cos	t of operation was higher than the sal	es
therefore a decision was made by all the pa	rtners to close the company as of 12/31/2	009
5. CHECK ONE:		
-OR-	nited liability company have been paid or discharged.	
<del>_</del> · ·	bts, obligations and liabilities pursuant to s. 608.4421.	
<ol><li>All remaining property and assets have been distribut rights and interests.</li></ol>	ed among its members in accordance with their respec	tive
7. CHECK ONE:		
There are no suits pending against the comparation of the same entered against it in any pending suit.	ny in any court. tisfaction of any judgment, order or decree which may	/ be
gnatures of the members having the same percentage of r	nembership interests necessary to approve the dissolut	ion:
Signature	Printed Name	
	RUDY RODRIGUEZ	
	TALE TO	
	AH EB	
	AS: -5	-
	Y OF <b>PA</b>	IT
	——————————————————————————————————————	
FILING	FEE: \$25.00	