

L19000215489

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

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01/23/24--01010--001 \*\*25.00

2024 JAN 23 PM 2:19  
CLERK OF COURT  
CLERK OF COURT

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: 6 Mangrove Point 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:

Mary Kidwell

(Name of Person)

(Firm/Company)

6311 Ash St.

(Address)

Prairie Village, KS 66208

(City/State and Zip Code)

2023 JAN 23 PM 2:19  
RECEIVED  
CORPORATION  
DIVISION

For further information concerning this matter, please call:

Mary Kidwell

913

200-5670

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:**

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  
6 MANGROVE POINT, LLC

2. The Articles of Organization were filed on 08/22/2019 and assigned  
document number 1.19000215489

3. The delayed effective date the dissolution if not effective on the date of filing, 1/9/2024  
(effective date cannot be prior to or more than 90 days later than date document is received for filing)  
**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be  
listed as the document's effective date on the Department of State's records.

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 needed.

5. If there are no members, enter the name and address of the person appointed to wind up the company's  
activities and affairs: Mary L. Kidwell, Manager

6311 ASH STREET

PRAIRIE VILLAGE, KS 66208

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: \_\_\_\_\_

Mary L. Kidwell  
Signature

Mary L. Kidwell

Printed Name

**FILING FEE: \$25.00**

2024 JUN 23 PM 2:19  
SECRET