(Requestor's Name) (Address) (Address)	800376667268
(City/State/Zip/Phone #)     PICK-UP     (Business Entity Name)     (Document Number)     Certified Copies Certificates of Status     Special Instructions to Filing Officer:   Office Use Only	11/19/2101014022 +++43.75 IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII

## **COVER LETTER**

## **TO:** Amendment Section Division of Corporations

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Key Largo Group, Inc. SUBJECT:

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SUBJECT:	
DOCUMENT NUMBER:	
The enclosed Articles of Dissolution and	fee are submitted for filing.
Please return all correspondence concernir	ng this matter to the following:
Stephanie M. Scott	
(Name of	Contact Person)
Keating Muething & Klekamp, PLL	
(Fir	m/Company)
One East Fourth Street, Suite 1400	
(A	Address)
Cincinnati, OH 45202	
(City/Sta	ate and Zip Code)
For further information concerning this ma	atter, please call:
Stephanic M. Scott	at (
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amou	unt:
	<ul> <li>\$43.75 Filing Fee &amp; S52.50 Filing Fee.</li> <li>Certified Copy</li> <li>(Additional copy is enclosed)</li> <li>Certified Copy</li> <li>(Additional copy is enclosed)</li> </ul>
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	<u>Street Address:</u> Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## 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:
	Key Largo Group, Inc.

SECOND: The document number of the corporation (if known):\_\_\_\_\_

THIRD: The date dissolution was authorized:

Effective date of dissolution if applicable:

(no more than 90 days after dissolution tile date) <u>Note:</u> 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.

FOURTH: Dissolution was approved by the shareholders. in the manner required by this chapter and the articles of incorporation.

:1 Hd 61 1011202 50 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 that fiduciary)

Karl J. Grafe

(Typed or printed name of person signing)

Vice President

(Title of person signing)

Filing Fee: \$35

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.

Key Largo Group, Inc.

The above named corporation is the subject of dissolution and the effective date of a dissolution is:

November 17, 2021

(date filed with the Dept of date specified in the Articles of Dissolution)

Description of information that must be included in a claim:

Name and contact information of individual/entity making claim;

Nature of Claim or matter giving rise to claim and any facts/circumstances supporting claim;

Date claim arose;

Amount of claim;

Any claim must be in writing.

Mailing address where written claims can be sent: (Claims cannot be sent to the Division of Corporations)

Key Largo Group, Inc.

ATTN: Karl J. Grafe, Vice President

301 East Fourth Street

Cincinnati, OH 45202

A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Stephanie M. Scott

Printed Name of the Person Filing

Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00