L0000001160

(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:
Special Instructions to Filing Officer: J. HORNE J. WY. 8 2021
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10/28/21--01026--007 **55.00



COVER LETTER

TO: Registration Section Division of Corporations		
2		
SUBJECT: KMP Properties LLC (Name of Limited Liability Company)		
(Name of Limited	Liability Company)	
The enclosed Articles of Dissolution and fee(s) are submitted	d for filing.	
Please return all correspondence concerning this matter to th	e following:	
Peter m.	Dayton	
(Name	of Person)	
(Firm/Company)		
	1 (
1 × 15 S K	ennes Huy	
Stuart	FC 3 4994 and Zip Code)	
(City/State	and Zip Code)	
For further information concerning this matter, please call:		
Devise Moura	at (772) 731 - 5556 (Area Code & Daytime Telephone Number)	
(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:	Street Address:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	
P.O. Box 6327	The Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

FILED

2021 OCT 28 PH 3: 48

1.	The name of a limited liability company is SECRETARY UP S TALLAHASSEE, II
	Kmp Properties, LLC TALLAHASSEE, II
2.	The Articles of Organization were filed on $\frac{2/5/2003}{}$ and assigned
	document number <u>L 000000 11160</u>
3.	The delayed effective date the dissolution if not effective on the date of filing: (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).
	Polly Sold to new owner
5.	If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:
	1315 S. Kannes Hwy
	Strart FC 34994
6. ab	Signature of an authorized person or if there are no members, the signature of the person appointed and listed ove to wind up the company's activities and affairs:
	P. Kmiller
	Fignature Printed Name Poter M Dayton Printed Name
	Signature Printed Name

FILING FEE: \$25.00