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AND AHASSEE. FLORID!

J. BRYAN

JAN 2 2 2009

EXAMINER

COVER LETTER

	ation Section n of Corporations		
SUBJECT:	HKP FINANCIAL (Name of Lie	LLC mited Liability Company)	
The enclosed Ar	ticles of Dissolution and fee(s) are sub	mitted for filing.	
Please return all	correspondence concerning this matter	r to the following:	10 17A1
	NORMAN HURN	/ T2_ Name of Person)	FILED 10 JAN 21 PH 12: 22 10 JAN 21 PH 12: 22 SECRETARY OF STATE TALLAH ASSEE, FLORID
	(Firm/Company)	D: 2% EL器 EL器
	9200 W. BAY	HARbor DR. APT 3/	9 9
	BAY HARbor J	State and Zip Code)	_
For further infor	mation concerning this matter, please of	call:	
_No	(Name of Person)	at (305) 778-48 (Area Code & Daytime Telephone No	8 9/ umber)
Enclosed is a chec \$25.00 Filing F	ck for the following amount: ce 30.00 Filing Fee & Certificate of Status	Certified Copy Certificate (additional copy is enclosed) Certified C	Filing Fec, of Status & Copy I copy is enclosed)
	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	STREET/COURIER AD Registration Section Division of Corporations Clifton Building 2661 Executive Center Cir	

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

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SELY .
and assigned document numbers
- Signi
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dissolution pursuant to section
SED All BUSINELS,
7 ANY BUSIN-ES GAINS
The company
ny have been paid or discharged.
iabilities pursuant to s. 608.4421.
rs in accordance with their respective
ment, order or decree which may be
necessary to approve the dissolution:
Printed Name
Just C. Krou
VIJUAI WIR
ORMAN HURU, TZ