L01000021485

| (Requestor's Name) |
|---|
| (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 7 lining Officer. |
| |
| |
| |
| |
| |
| |

Office Use Only



700266631647

06/30/15--01023--006 **25.00



M. MILLIGAN EXAMINER

SEP -1 2015

COVER LETTER

TO: Registration Section

| Division o | f Corporations | |
|---|---|--|
| SUBJECT: DIS | SOLUTION (| OF LLC |
| DOCUMENT NU | MBER: <u>L01000</u> | 021485 |
| The enclosed Notic | e of Limited Liability (| Company Dissolution and fee are submitted for filing. |
| Please return all co | respondence concerning | this matter to the following: |
| KENNETH | R. KENNER | LY |
| | (Name of C | Contact Person) |
| IGP GROU | JP, LLC | |
| | (Firm | n/Company) |
| 18559 SE | PALM ISLAN | D LANE |
| | (Ac | idress) |
| JUPITER I | FL 33458 | |
| | (City/Stat | e and Zip Code) |
| For further informa | tion concerning this mat | ter, please call: |
| KENNETH | R. KENNERI | -Y _{at (} 561 ₎ 799-4603 |
| | Contact Person) | (Area Code) (Daytime Telephone Number) |
| Enclosed is a check | for the following amou | nt: |
| ∱ \$25 Filing Fee | ☐ \$30 Filing Fee & Certificate of Status | □ \$55 Filing Fee & □ \$60 Filing Fee, Certified Copy Certificate of Status & (Additional copy is enclosed) Certified Copy (Additional copy is enclosed) |
| MAILING A Amendmen Division of P.O. Box 6 Tallahassee | t Section Corporations 327 | STREET ADDRESS: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 |



FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED

15 JUN 16 AM 7: 28

SECRETARY OF STATE TALLAHASSEE, FLORIDA

May 7, 2015

IGP GROUP, LLC ATTN: KENNETH R. KENNERLY 18559 SE PALM ISLAND LANE JUPITER, FL 33458

SUBJECT: IGP GROUP, LLC Ref. Number: L01000021485

We have received your document for IGP GROUP, LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

The limited liability company must complete and submit a Voluntary Dissolution along with the attached Notice of Dissolution in order to dissolve a Florida limited liability company on our records. The fee to file both the Voluntary Dissolution and Notice of Dissolution is \$25.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Michelle Milligan Senior Section Administrator

Letter Number: 315A00008996



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 1, 2015

IGP GROUP, LLC ATTN: KENNETH R. KENNERLY 18559 SE PALM ISLAND LANE JUPITER, FL 33458

SUBJECT: IGP GROUP, LLC Ref. Number: L01000021485

Responded Des August 19,2015

We have received your document for IGP GROUP, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The limited liability company must complete and submit a Voluntary Dissolution along with the attached Notice of Dissolution in order to dissolve a Florida limited liability company on our records. The fee to file both the Voluntary Dissolution and Notice of Dissolution is \$25.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Michelle Milligan Senior Section Administrator

Letter Number: 315A00013805

any voires please call 561-799-4644

Tive Moulton

www.sunbiz.org

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

| 1. | The name of a limited liability company is | | بسر نمت نمست |
|-----------|--|-----------------------|--------------------|
| | IGP GROUP LLC | | |
| 2. | The Articles of Organization were filed on 12 10 200 1 and assign | gned The Table | |
| | document number <u>L01000021485</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 a Note: If the date inserted in this block does not meet the applicable statutory filing requirements listed as the document's effective date on the Department of State's records. | s, this date will not | . b |
| 4. | A description of occurrence that resulted in the limited liability company's dissolution p 605.0707, Florida Statutes, (copy 605.0707 on back cover letter). | oursuant to section | n |
| | Company was dissolved due & | 10 <u>0</u> | |
| | activity | | |
| 5. | If there are no members, enter the name and address of the person appointed to wind up activities and affairs: | the company's | |
| | 18559 SE Palm Tsla | el Liane | |
| | Jupiler FL 33458 | | |
| 6. lis | Signature of an authorized person or if there are no members, the signature of the person sted above to wind up the company's activities and affairs: | n appointed and | |
| | Signature Kenneth R. Printed Name | Kennerly | |

FILING FEE: \$25.00

Notice of Limited Liability Company Dissolution

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

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

| | nited Liability Co | | | | | | |
|----------------|--------------------|---------------|-----------------------|--------------------|-------------|-------------|----------|
| Document no | umber of Limited | d Liability C | Company is: L010 | 000021485 | 5 | | |
| Date of disso | olution was: 03 | /31/201 | 15 | | | | |
| Description of | of information th | at must be i | ncluded in a written | relaim: | | | |
| <u>com</u> | pany | Was | dissolve | ed for | _0 | ach | nhy |
| | | | | | | | |
| | | | | , | | | |
| | | | | | | | |
| Mailing add | ress where claim | s can he sen | t: (Claims cannot be | e sent to the Divi | sion of Cor | morations) | |
| Mailing add | | | t: (Claims cannot be | | sion of Cor | porations) | 35 SE |
| Mailing addi | KENNE | THR | • | | sion of Cor | rporations) | 15 SEP - |
| Mailing add | KENNE | ETH R F | KENNERLY SLAND LAI | | sion of Cor | rporations) | SEP -1 |
| Mailing add | KENNE 18559 I | ETH R F | KENNERLY SLAND LAI | | sion of Cor | rporations) | SEP -1 |

commenced within 4 years after the filing of this notice.

KENNETH R. KENNERLY

Printed Name of the Person Filing

Signature of the Person Filing