L04000026029

—	(Requestor's Name)				
	(Address)				
	(Address)				
_	(City/State/Zip/Phone #)				
	PICK-UP WAIT MAIL				
—	(Business Entity Name)				
—	(Document Number)				
Cer	I Copies Certificates of Status				
					
SI	al Instructions to Filing Officer.				
<u> </u>					

Office Use Only



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ZDOL MOV29 PH 2: 41
ZHORAHON
ALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

TO:

TO:	Registration S Division of Co			
SUBJI	ECT: Kahuna's	s Charters, L.L.C.		
			Limited Liability Company)	
		of Dissolution and fee(s) are sub condence concerning this matte	•	2004 HON 29 PM 2:42
	Ti	mothy Polito		PA 2
	S ingapa		(Name of Person)	62 3
	Kahunas C	harters	•	RION 2
			(Firm/Company)	
			(1.000)	
	466 Le	eger Dr.		
			(Address)	
	Noko	omis, FL 34275		
		(Cit	ty/State and Zip Code)	<u> </u>
		•		
For fur	ther information	concerning this matter, please	call:	
	Timothy Polit		at (941) 284-77	
		(Name of Person)	(Area Code & Daytime	Telephone Number)
Enclose	ed is a check for the	e following amount:		
Ø \$ 25.	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
STREET ADDRESS: Registration Section Division of Corporations 409 F. Gaines Street			MAILING ADDRI Registration Section Division of Corpora	ı

Tallahassee, Florida 32399

Tallahassee, Florida 32314