*L04000063300

(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:
CORRECTION TO EFFECTIVE DATE
PER CONVERSATION WITH
THE LAW OFFICE OF MICHEAL LAPAT
5/7/2015 KS

Date

Office Use Only

500272179395

EFFECTIVE DATE
4-28-2015

04/28/15--01016--015 **30.00

FILED
2015 APR 28 PM 4:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
EXAMINER

MAY -7 2015

LAW OFFICE
MICHAEL LAPAT
3300 University
Suite 311
Coral Springs, Florida 33065
(954) 345-6442(312)
(954) 344-0288 (Fax)

APRIL 22, 2015

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

**RE: TK FUND ADVISORS, LLC**

Please find enclosed herewith a Articles of Dissolution, an Notice of Limited Liability Company, and check in the amount of $30.00 payable to the Florida Department of State. Please file the foregoing of record and return the stamped copies of these documents to my attention with evidence of filing in your office using the enclosed self-addressed envelope.

Thank you for your assistance in this matter.

Very truly yours,

Michael Lapat

Michael Lapat

ML/lm
enclosure

# COVER LETTER

**TO:** Registration Section
Division of Corporations

**SUBJECT:** TK FUND ADVISORS, LLC
(Name of Limited Liability Company)

The enclosed Articles of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

(Name of Person)

LAW OFFICE OF MICHAEL LAPAT
(Firm/Company)

3300 UNIVERSITY DRIVE SUITE 311
(Address)

CORAL SPRINGS, FL 33065
(City/State and Zip Code)

For further information concerning this matter, please call:

VANESSA PUELL at (954) 345-6442
(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:**
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

**STREET/COURIER ADDRESS:**
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

EFFECTIVE DATE 4-28-2015

FILED
2015 APR 28 PM 4:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

# ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is
TK FUND ADVISORS, LLC

2. The Articles of Organization were filed on 08/24/2004 and assigned document number L04000063300

3. The delayed effective date the dissolution if not effective on the date of filing: 04/28/2015
(effective date cannot be prior to or more than 90 days later than date document is received for filing)

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).
Manager agreed to file articles of dissolution.

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs: MICHAEL LAPAT

6. Signature of an authorized person or if there are no members, the signature of the person appointed and listed above to wind up the company's activities and affairs:

Michael Lapat
Signature

MICHAEL LAPAT
Printed Name

**FILING FEE: $25.00**

EFFECTIVE DATE
4-28-2015

# Notice of Limited Liability Company Dissolution

**NOTE: This page is optional**

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.

Name of Limited Liability Company: TK FUND ADVISORS, LLC

Document number of Limited Liability Company is: L04000063300

Date of dissolution was: _____

Description of information that must be included in a written claim:

Manager agreed to file articles of dissolution.

FILED
2015 APR 28 PM 4:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

3300 University Drive Suite 311

Coral Springs, FL 33065

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

MICHAEL LAPAT
Printed Name of the Person Filing

Michael Lapat
Signature of the Person Filing

**Fee: No charge if included with Articles of Dissolution. If filed separately $25.00**