

L050000061640

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

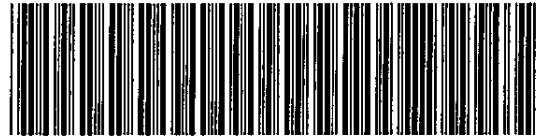
(Document Number)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
07 APR 16 PM 3:55

**ARTICLES OF DISSOLUTION  
FOR  
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is  
Kapstock Realty LLC

2. The Articles of Organization were filed on 6/21/2005 and assigned document number  
L05000081640

3. The date the dissolution was approved: 12/31/2006

4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 608.441, Florida Statutes, (copy 608.441 on back cover letter).  
The LLC was formed to buy and sell real-estate. With the change in the housing market we have decided to dissolve the LLC.

5. CHECK ONE:

- ☒ All debts, obligations and liabilities of the limited liability company have been paid or discharged.  
-OR-  
☐ Adequate provision has been made for the debts, obligations and liabilities pursuant to s. 608.4421.

6. All remaining property and assets have been distributed among its members in accordance with their respective rights and interests.

7. CHECK ONE:

- ☒ There are no suits pending against the company in any court.  
-OR-  
☐ Adequate provision has been made for the satisfaction of any judgment, order or decree which may be entered against it in any pending suit.

Signatures of the members having the same percentage of membership interests necessary to approve the dissolution:

Signature

Printed Name

Henry Kaplan  
Joan Kaplan  
JEFFREY WHITE  
Bonnie Vaccaro  
CATHERINE H. ADAMS  
E. Jay Stepper  
Minor Vaccaro

Henry Kaplan  
Joan Kaplan  
JEFFREY WHITE  
Bonnie Vaccaro  
CATHERINE H. ADAMS  
E. Jay Stepper  
Vaccaro, MIRO

FILING FEE: \$25.00

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DIVISION OF CORPORATIONS

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## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** KAPSTOCK REALTY, 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:

HARVEY KAPLAN

(Name of Person)

(Firm/Company)

8741 VIA BRILLIANTE

(Address)

WELLINGTON , FL. 33411

(City/State and Zip Code)

For further information concerning this matter, please call:

HARVEY KAPLAN

(Name of Person)

at ( 561 ) 795-4888

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$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)

**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