

LO5000072919

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

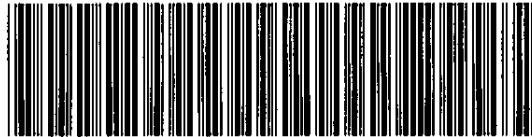
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED

2018 APR 24 AM 8:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2018 APR 24 AM 11:10

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APR 25 2018
J. HARRIS

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 177792 7447138

AUTHORIZATION :

[Signature]

COST LIMIT : \$ 25.00

ORDER DATE : April 24, 2018

ORDER TIME : 9:14 AM

ORDER NO. : 177792-085

CUSTOMER NO: 7447138

DOMESTIC FILINGS

NAME: KRA GATES LLC

XX ARTICLES OF DISSOLUTION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY
_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Emily Croft - EXT# 62925

EXAMINER'S INITIALS: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: KRA GATES 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:

Debra Hartman, VP Accounting

(Name of Person)

c/o Fieldstone Properties I, LLC

(Firm/Company)

1719 Route 10 East, Suite 220

(Address)

Parsippany NJ 07054

(City/State and Zip Code)

For further information concerning this matter, please call:

Debra Hartman, VP Accounting at 973 455-8882
(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

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

1. The name of a limited liability company is

KRA GATES LLC

2. The Articles of Organization were filed on 07/25/2005 and assigned

document number L05000072919

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 received for filing)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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).

Entity sold.

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

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:


Signature

Joseph Kazarnovsky, Managing Member

Printed Name

FILING FEE: \$25.00

FILED
2011 APR 24 AM 10:31
CLERK OF THE COURT
JUDICIAL CIRCUIT IN AND FOR
THE NINTH JUDICIAL CIRCUIT
TALLAHASSEE, FLORIDA