

LOS 0000 87189

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

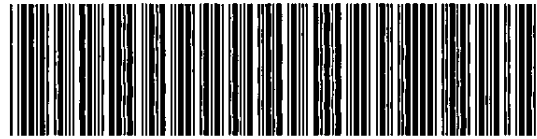
(Document Number)

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2008 MAY -9 AM 10:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. CLINE

MAY 12 2008

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT:

KATHLEEN M. FLORA, 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) *Kathleen M. Flora*

(Firm/Company) *KATHLEEN M. FLORA, LLC*

(Address) *400 MADISON ST #2108*

(City/State and Zip Code) *ALEXANDRIA VA 22314*

For further information concerning this matter, please call:

KATHLEEN M. FLORA *703-717-9798*
at ()
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

\$125.00

p \$25.00 Filing Fee p \$30.00 Filing Fee & p \$55.00 Filing Fee &
Certificate of Status Certified Copy Certificate of Status &
(additional copy is enclosed) Certified Copy
(additional copy is enclosed)

p \$60.00 Filing Fee,

MAILING ADDRESS: STREET/COURIER ADDRESS:

Registration Section Registration Section

Division of Corporations Division of Corporations

P.O. Box 6327 Clifton Building

Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

2008 MAY -9 AM 10 54
FILE
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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

1. The name of a limited liability company is

Kathleen H. FLORA, LLC

2. The Articles of Organization were filed on *9/2/2005* and assigned document number

L05000087189

3. The date the dissolution was approved: *May 1, 2008*

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).

*Closed business & moved
out of state -*

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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

Kathleen Flora KATHLEEN FLORA

FILING FEE: \$25.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA