L05000101445

| (Requestor's Name) |
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| (Address) |
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| (Address) |
| (Address) |
| |
| (City/State/Zip/Phone #) |
| |
| PICK-UP WAIT MAIL |
| |
| (Business Entity Name) |
| (Business Entry Name) |
| |
| (Document Number) |
| |
| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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Office Use Only



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FILED

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SECRETARY OF STATE
SECRETARY OF STATE

J. BRYAN

APR 2 9 2009

EXAMINER

COVER LETTER

| TO: Registration Section Division of Corporations | |
|---|--|
| SUBJECT: Richard Vander Kelen LLC (Name of Limited Liability Company) | |
| (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: | |
| Richard Vander Kekn (Name of Person) | FILEU 09 APR 28 PM 3: 28 SECRETARY OF STATE SECRETARY SEE, FLORID |
| Richard Vender Kekn LLC (Firm/Company) | 福里! |
| (Firm/Company) | FLST W |
| 1230 Wildworl Lakes Blul # 306 | 28 ATE A |
| 1230 Wildworl Lakes Blul # 306 (Address) Naples FL 34/04 | - |
| (City/State and Zip Code) | |
| For further information concerning this matter, please call: | |
| Richard Vander Kelen at (239) 263-8735 (Name of Person) (Area Code & Daytime Telephone Num | ahaa) |
| (Name of Person) (Area Code & Daytime Telephone Num | iber) |
| Enclosed is a check for the following amount: | |
| \$25.00 Filing Fee 2 30.00 Filing Fee 2 S55.00 Filing Fee 2 Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy | f Status & |
| MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 STREET/COURIER ADD Registration Section Division of Corporations Clifton Building | RESS: |
| Tallahassee, FL 32314 Zeff Executive Center Circl | e |

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY



| 1. The name of a limited liability company is RICHARD VANDER KE | LEN LLC | ORITE OR |
|--|----------------------------|---------------------------------------|
| 2. The Articles of Organization were filed on | | and assigned document number |
| 3. The date the dissolution was approved: | -24-09 | |
| 4. A description of occurrence that resulted in the life 608.441, Florida Statutes, (copy 608.441 on back | mited liability company's | dissolution pursuant to section |
| | | |
| 5. CHECK ONE: | | |
| All debts, obligations and liabilities of the OR-Adequate provision has been made for the 6. All remaining property and assets have been districted. | e debts, obligations and l | iabilities pursuant to s. 608.4421. |
| rights and interests. 7. CHECK ONE: | | |
| There are no suits pending against the co -OR- Adequate provision has been made for the entered against it in any pending suit. | | gment, order or decree which may be |
| Signatures of the members having the same percentage | of membership interests | necessary to approve the dissolution: |
| Signature | | Printed Name |
| Mum 100% | Richa | of Vander Kelen |
| | | |
| | | |
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