

LD5000104420

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

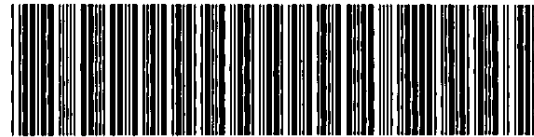
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

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2017 MAY - 1 AM 9:47  
BUREAU OF REVENUE  
TALLAHASSEE, FLORIDA

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05/02/17--01007--019 \*\*25.00

FILED  
17 MAY - 1 AM 7:58  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MAY 0 2025

J SHIVERS

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** KRK Property Holdings, 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:

M. Kathleen Hart, Esq.

(Name of Person)

Andersen Tate & Carr, P.C.

(Firm/Company)

1960 Satellite Blvd, Suite 4000

(Address)

Duluth, GA 30097

(City/State and Zip Code)

For further information concerning this matter, please call:

M. Kathleen Hart, Esq. at ( 770 ) 822-0900

(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

KRK Property Holdings, LLC

2. The Articles of Organization were filed on 10/24/2005 and assigned

document number L05000104420

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).

The consent of all the members, in accordance with Section 605.0701(2) of the

Florida Revised Limited Liability Act.

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

M. Kathleen Hart  
Signature

M. Kathleen Hart, Attorney-in-Fact  
Printed Name

**FILING FEE: \$25.00**

FILED  
17 MAY - 1 AM 7:58  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## 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: KRK Property Holdings, LLC

Document number of Limited Liability Company is: L05000104420

Date of dissolution was: \_\_\_\_\_

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

A statement of claim must include the following information: (a) name of claimant, or agent of claimant, that may be contacted concerning the claim;

(b) address where claimant, or agent of claimant, may be contacted concerning the claim; (c) telephone numbers (including area code) where claimant, or agent of claimant,

may be contacted during normal business hours concerning the claim; (d) other means of contact, such as electronic mail, where claimant, or agent of claimant, may be contacted concerning the claim;

(e) description and amount of the claim; (f) the date(s) the transaction or events giving rise to the claim arose or occurred; and

(g) any other pertinent information and documentation concerning the claim.

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

156 Spyglass Lane

Jupiter, FL 33477

FILED  
17 MAY - 1 AM 7:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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.

M. Kathleen Hart, Attorney-in-Fact

Printed Name of the Person Filing

M. Kathleen Hart

Signature of the Person Filing

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