(Requestor's Name)
(Address)
(Address)
(Addiess)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
1,00 ,1,00 , 71
1789 4689 671

Office Use Only



600146409516

03/23/09--01012--017 **25.00

M. THOMAS

APR - 2 2009

EXAMINER

NO5-114906

KIM A. GILL 14047 Crane Terrace Clearwater, FL 33762 PH: (727) 572-4670

March 20, 2009

Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

To whom it may concern:

Attached is the paperwork to voluntarily dissolve my limited liability company. I can be reached at (727) 572-4670 if you require further information.

Sincerely

Kim A. Gill

O9 APR -1 AH 8: 55

COVER LETTER

Division of Corporations
SUBJECT: GILL & ASSOCIATES, 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:
Kim A. Gill
(Name of Person)
GILL & ASSOCIATES, LLC /
(Firm/Company)
GILL & ASSOCIATES, LLC / (Firm/Company) 14047 Crane Terrace (Address) Clearwater, FL 33762
(Address)
Clearwater, FL 33762
(City/State and Zip Code)
For further information concerning this matter, please call:
Kim A. Gill _{at (} 727) 572-4670
(Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee 30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certificate of Status (additional copy is enclosed) \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
MAILING ADDRESS: STREET/COURIER ADDRESS: Pagintentian Section Registration Section

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 24, 2009

KIM A. GILL 14047 CRANE TERRACE CLEARWATER, FL 33762

SUBJECT: GILL & ASSOCIATES, LLC

Ref. Number: L05000114906

We have received your document for GILL & ASSOCIATES, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Number three of the document must contain the date the decision to dissolve was approved or became effective. This date must be prior to the date this document was submitted for filing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6097.

Marsha Thomas Regulatory Specialist II Letter Number: 509A00009899

- ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

L0500011	of Organization w 4906	vere filed on 11/2	8/05	and assigned document numbe
3. The date the	dissolution was ap	oproved	3/31/0	<u>8_</u> .
			ited liability company' cover letter). SS to work for a	s dissolution pursuant to section n employer.
				SECONE LAN
5. CHECK ON	E:			ASSET THE PROPERTY OF THE PROP
	-		-	iny have been paid or discharge and liabilities pursuant to s. 608.4
	property and ass		_	ers in accordance with their respective
7. CHECK ON				
✓ Ther		ding against the com	pany in any court.	
Ade		is been made for the y pending suit.	satisfaction of any jud	gment, order or decree which may be
natures of the n	nembers having th	e same percentage c	of membership interests	necessary to approve the dissolution
) Sign	ature /			Printed Name
Kum a	Bull		_ K	im A. Gill
,				
,				

FILING FEE: \$25.00