# L0600000000000044

;
(Requestor's Name)
(Address)
,
(Address)
·
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Charles leading the Filing Officer
Special Instructions to Filing Officer:

Office Use Only



700105086157

07/09/07--01019--009 \*\*25.00

CRETARY OF STATE

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: KB CIOSINGS 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:	
5911 Linden Lane  Shokulia, Florida 33922	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
(Name of Person) at (239) 332 · 240 (Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:  \$25.00 Filing Fee \$  Certificate of Status \$55.00 Filing Fee &  Certificate of Status \$  Certificate of Status &  Certificat	l)

## 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			
2. The Articles of Organization were filed on	19/2006	and assigned docume	ent number
3. The date the dissolution was approved:	2007	·	
4. A description of occurrence that resulted in the limit 608.441, Florida Statutes, (copy 608.441 on back company Clisco.	ted liability company's cover letter).	2001 JUL -9 1 SECRETARY C ALLAHASSEE	ction
		FLO	O
5. CHECK ONE:		O3 ATE RIDA	
All debts, obligations and liabilities of the OR-Adequate provision has been made for the	debts, obligations and lia	bilities pursuant to s. 608	3.4421.
<ol><li>All remaining property and assets have been distrib rights and interests.</li></ol>	uted among its members	in accordance with their	respective
7. CHECK ONE:  There are no suits pending against the com	pany in any court.		
OR- Adequate provision has been made for the entered against it in any pending suit.	satisfaction of any judgm	ent, order or decree which	ch may be
Signatures of the members having the same percentage of	membership interests no	ecessary to approve the d	issolution:
Siefature		Printed Name	
HUTTHE	<u> Lir</u>	nberry Brothe	13
•			
	·		

FILING FEE: \$25.00

Please send all Correspondence to:

Kimberly Brothers 5711 Linden Lane Bokellia, Florida 33922

Phone 813-312-2280 or 239-332-2401

TILED

2001 JUL -9 P U: 03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA