

10600075852

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

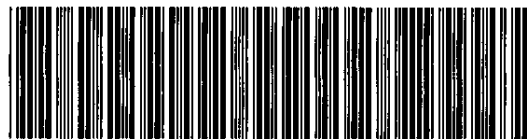
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

APR 09 2014

J. B. BROWN

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: KIEN ENTERPRISES, 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:

MICHAEL P. RHOADES

(Name of Person)

RHOADES LEVY LAW GROUP P.C.

(Firm/Company)

3400 Dundee Road, Suite 340

(Address)

Northbrook, Illinois 60062

(City/State and Zip Code)

For further information concerning this matter, please call:

Debbie Baltazar

(Name of Person)

847

at ()

870-7600 Ext. 304

(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

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

1. The name of a limited liability company is

KIEN ENTERPRISES, LLC

2. The Articles of Organization were filed on July 31, 2006 and assigned

document number L06000075852

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)

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).

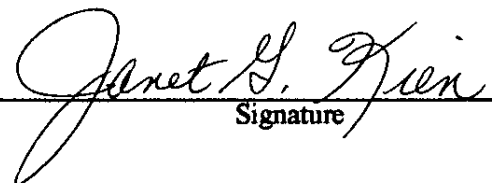
The consent of all the members.

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs: JANET G. KEIN

100 Lake Shore Drive, Unit L1

North Palm Beach, Florida 33408

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:


Signature

JANET G. KIEN

Printed Name

FILING FEE: \$25.00

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TALLAHASSEE, FLORIDA

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