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COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT:

KRES-FL, 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:

Sherin Sakr	
(Name of Person)	
Kahala Brands, Ltd.	
(Firm/Company)	
9311 E Via de Ventura	
(Address)	
Scottsdale, AZ 85258	
(City/State and Zip Code)	2016 NAR
For further information concerning this matter, please call:	
Sherin Sakr480 \ 362-4360	
(Name of Person) (Area Code & Daytime Telephone Number 1)	×ı,
Enclosed is a check for the following amount:	0.1
■ \$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 liabil KRES-FL, LLC	ity company is				_•			
2.	The Articles of Organization	n were filed on $\frac{8/30/3}{2}$	2006	and assigne	ed				
	document number L0600008	5669							
3.	(effective Note: If the date inserted in the	layed 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) If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be 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 505.0707, Florida Statutes, (copy 605.0707 on back cover letter).								
Company ceased doing business in Florida and the Member resolved to dissolve									
						_			
						_			
						-			
5.	If there are no members, ent activities and affairs:	er the name and add	ress of the person appoir	nted to wind up th	ne company's	- S -			
Attn: Legal Department					_				
		9311 E Via de Ventu	ora		<u> </u>	_			
		Scottsdale, AZ 8525	58		IB WAR	77			
6. lis	Signature of an authorized pated above to wind up the con	erson or if there are npany's activities an	no members, the signatu d affairs:	are of the person a	ini _{ses}	d E			
		_			P P: 0	Ö			
	Signature		Sherin Sakr Pr	inted Name	Sm)-	-			

FILING FEE: \$25.00