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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to I	Filing Officer:	
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SECRETARY OF STATE
DIVISION OF CORPORATION

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: WKH 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:
Willis Hamilton (Name of Person)
(Firm/Company)
5714 N-E- Timber/Hills DR- (Address)
Lee's Summit MO- 64064 (City/State and Zip Code)
For further information concerning this matter, please call:
Willis James on at (816) 795-5462 (Name of Person) (Area Code & Daytime Telephone Number)
(Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee Certificate of Status S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status & Certificate of Status & Certified Copy (additional copy is enclosed) (additional copy is enclosed)
MAILING ADDRESS: STREET/COURIER ADDRESS: Registration 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

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is $WKH LLC$					
2. The Articles of Organization were filed on	p -10 -l	06	and assigned doo	ument nu	mber
 3. The date the dissolution was approved:	imited liabilit k cover letter)	y company's di			
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5. CHECK ONE: All debts, obligations and liabilities of the OR-Adequate provision has been made for the 6. All remaining property and assets have been distrights and interests. 7. CHECK ONE: There are no suits pending against the color OR-Adequate provision has been made for the entered against it in any pending suit.	he debts, obli ributed amon ompany in an he satisfaction	gations and liab g its members in y court. n of any judgme	ilities pursuant to s n accordance with t nt, order or decree	. 608.442 heir respe	1. ctive y be
Signature Signature	e of members	•	Printed Name	he dissolu	ition:
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FILI	ING FEE: \$2	25.00		<u></u>	2108