LD70000130

	(Ře	equestor's Name)	
	(Ad	ldress)	
	(Ad	ldress)	
	(Cit	ty/State/Zip/Phon	ne #)
	PICK-UP	☐ WAIT	MAIL
	(Bu	ısiness Entity Na	me)
 , ,	(Do	ocument Number)
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Special Instructions to Filing Officer:

L. SELLERS

MAR 13 2009

EXAMINER

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03/12/09--01015--005 **25.00

09 MAR 12 AM 8: 10 SECRETALY OF STATE FALLAHASSEE FLORID

COVER LETTER

Division of	Section Corporations		
SUBJECT:	PKN ENTE	RPRISES LLC imited Liability Company)	
	(Name of L	imited Liability Company)	
The enclosed Articles	s of Dissolution and fee(s) are su	bmitted for filing.	
Please return all corre	espondence concerning this matte	er to the following:	
	PAM Nic	KEIL	
	,	(Name of Person)	
	N/A		
	$\overline{}$	(Firm/Company)	
	1710 Dovit	(Address) (Address) (Address) (Address) (Address)	
	<i></i>	(Address)	······································
	VENICE F	1. 34243	
	(City	y/State and Zip Code)	
For further information	on concerning this matter, please	call:	
			
	(Name of Person)	at () (Area Code & Daytime	Talaskara Nortan
	(Name of Person)	(Area Code & Daytine	: Telephone Number)
Englosed is a check for	the following amount:		
\$25.00 Filing Fee	30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	AILING ADDRESS:	STREET/COU	RIER ADDRESS:
Registration Section		Registration Sec	etion

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

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

FILED 09 MAR 12 AM 8: 10

SECRETARY OF STATE TALLAHASSEE FLORIDA

1. The name of a limited liability company is $PKN ENTERPRISES,$	LLC TALLAHASSEE FLORIC
/	のい: 577, 2007 and assigned document number
3. The date the dissolution was approved:	
4. A description of occurrence that resulted in the limite 608.441, Florida Statutes, (copy 608.441 on back covered to the second control of the second co	
5. CHECK ONE:	·
Adequate provision has been made for the de	mited liability company have been paid or discharged. ebts, obligations and liabilities pursuant to s. 608.4421. ted among its members in accordance with their respective
7. CHECK ONE:	
There are no suits pending against the compa	any in any court.
	atisfaction of any judgment, order or decree which may be
Signatures of the members having the same percentage of i	nembership interests necessary to approve the dissolution:
Signature	Printed Name
Van Richell	PAM NickEll
	•
`	
•	