

✓  
L070000029691

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



700218231027

01/17/12--01065--018 \*\*30.00

FILED  
12 JAN 17 PM 4:56  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

B. BOSTICK

JAN 18 2012

EXAMINER

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** DREAMY RETREATS  
(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:

KATHLEEN M. KALLAUS  
(Name of Person)

DREAMY RETREATS  
(Firm/Company)

2128 FOREST HOLLOW WAY  
(Address)

SAINT JOHNS, FL 32259  
(City/State and Zip Code)

For further information concerning this matter, please call:

KATHLEEN M. KALLAUS at ( 904 ) 403-8056  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed 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)

**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

12 JAN 17 AM 4:56  
TALLAHASSEE  
FLORIDA

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

1. The name of a limited liability company is

DREAMY RETREATS

2. The Articles of Organization were filed on MARCH 20, 2007 and assigned document number

L 07000029691

3. The date the dissolution was approved: SEPTEMBER 1, 2011

4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 608.441, Florida Statutes, (copy 608.441 on back cover letter).

LACK OF BUSINESS

**5. CHECK ONE:**

- ☒ All debts, obligations and liabilities of the limited liability company have been paid or discharged.  
-OR-  
☐ Adequate provision has been made for the debts, obligations and liabilities pursuant to s. 608.4421.

6. All remaining property and assets have been distributed among its members in accordance with their respective rights and interests.

**7. CHECK ONE:**

- ☒ There are no suits pending against the company in any court.  
-OR-  
☐ Adequate provision has been made for the satisfaction of any judgment, order or decree which may be entered against it in any pending suit.

Signatures of the members having the same percentage of membership interests necessary to approve the dissolution:

Signature

Printed Name

Kathleen M. Kallaus

KATHLEEN M. KALLAUS

## *Certified Copy*

I certify the attached is a true and correct copy of the Articles of Organization of DREAMY RETREATS LLC, a limited liability company organized under the laws of the state of Florida, filed electronically on March 20, 2007 effective April 03, 2007, as shown by the records of this office

I further certify that this is an electronically transmitted certificate authorized by section 15.16, Florida Statutes, and authenticated by the code noted below.

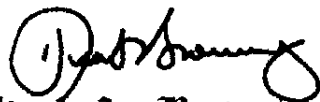
The document number of this limited liability company is L07000029691.

Authentication Code: 070320091120-700093772387#1

FILED  
12 JAN 17 PM 4:56  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Given under my hand and the  
Great Seal of the State of Florida  
at Tallahassee, the Capital, this the  
Twentieth day of March, 2007



  
Kurt S. Browning  
Secretary of State