

L08000045989

(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



800184016148

08/20/10--01001--015 **7.50

08/09/10--01009--029 **52.50

FILED
2010 AUG 18 PM 4:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. LEWIS

AUG 10 2010

EXAMINER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 10, 2010

MICHAEL PADYKULA
KULA SOLUTIONS LLC
2105 SE HAWTHORNE BLVD.
PORTLAND, OR 97214

SUBJECT: KULA SOLUTIONS LLC
Ref. Number: L08000045989

We have received your document for KULA SOLUTIONS LLC and check(s) totaling \$52.50 of which \$52.50 has been designated to file this document. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is an additional amount of \$7.50 due. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6047.

Carolyn Lewis
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 510A00019136

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: KULA SOLUTIONS 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 J PADYKULA

(Name of Person)

KULA SOLUTIONS LLC

(Firm/Company)

2105 SE HAWTHORNE BLVD

(Address)

PORTLAND, OREGON 97214

(City/State and Zip Code)

For further information concerning this matter, please call:

MICHAEL PADYKULA

(Name of Person)

at (503) 953 5279

(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

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

FILED

2010 AUG 18 PM 4:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is

KULA SOLUTIONS LLC

2. The Articles of Organization were filed on 5-7-2008 and assigned document number

LD8000045989

3. The date the dissolution was approved: 10 - 2009

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).

OWNER MOVED TO ANOTHER STATE

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

Michael J Padykula

MICHAEL J PADYKULA