

L08 0000 57068

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

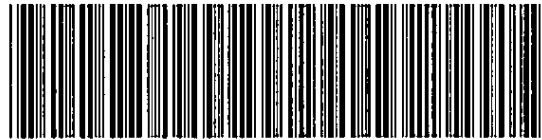
(Business Entity Name)

(Document Number)

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

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01/05/23--01009--002 \$25.00

RECEIVED  
2023-01-05 PM 1:02  
ESTATE  
CLERK, FL

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: PETER'S KNIFE SHOP  
(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:

PETER MEIER  
(Name of Person)

PETER'S KNIFE SHOP  
(Firm/Company)

109E-OLYMPIA AVE #305  
(Address)

PUNTA GORDA FL 33950  
(City/State and Zip Code)

For further information concerning this matter, please call:

PETER MEIER at (941) 457 1542  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$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 Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

ARTICLES OF DISSOLUTION  
FOR  
A LIMITED LIABILITY COMPANY

FILED  
2022-11-05 PM 1:02  
CLERK OF STATE  
TALLAHASSEE, FL

1. The name of a limited liability company is

PETER'S KNIFE SHOP LLC

2. The Articles of Organization were filed on 06/10/2008 and assigned

document number L08000057068

3. The delayed effective date the dissolution if not effective on the date of filing: 12/31/2022  
(effective date cannot be prior to or more than 90 days later than date document is received for filing)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed 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 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).

PETER'S KNIFE SHOP

DELAYED DECEMBER 31, 2022

ABOUT THE ECONOMY SITUATION

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:

PETER MEIER

5200 ALMAR DRIVE

PUNTA GORDA, FL 33950

6. Signature of an authorized person or if there are no members, the signature of the person appointed and listed above to wind up the company's activities and affairs:

Peter Meier

Signature

PETER MEIER

Printed Name

FILING FEE: \$25.00

## Notice of Limited Liability Company Dissolution

**NOTE: This page is optional**

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company: PETER'S KNIFE SHOP

Document number of Limited Liability Company is: LO8000057068

Date of dissolution was: \_\_\_\_\_

Description of information that must be included in a written claim:

BECAUSE OF THE ECONOMY SITUATION

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

PETER MEIER

5200 ALHON DRIVE

TUNTA GORRA, FL 33950

\_\_\_\_\_

A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

PETER MEIER  
Printed Name of the Person Filing

[Signature]  
Signature of the Person Filing