40800007/99/

(Re	equestor's Name)	
(Address)		
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL MAIL
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(Document Number)		
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09 MAY 12 AM 9: 46

SECRETARY OF STATE

T. HAMPTON

MAY 1 3 2009

EXAMINER

COVER LETTER

on Section of Corporations	
KJ Mahon Consultation (Name of Lim	ulting, LLC ited Liability Company)
cles of Dissolution and fee(s) are subm	itted for filing.
prrespondence concerning this matter to	o the following:
Kevin Mah	on
(N	ame of Person)
(F	rm/Company)
555 NE 15th 5	
	(Address)
	3313a tate and Zip Code)
ation of the state	15.
(Name of Person)	at (305) 372-0935 (Area Code & Daytime Telephone Number)
(**************************************	(
<u> </u>	_
Certificate of Status	\$55.00 Filing Fee &\$60.00 Filing Fee, Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
Ha # 209 A000108	- 09
MAILING ADDRESS: Registration Section Division of Corporations	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle
	(Name of Lime of Lime of Lime of Lime of Lime of Dissolution and fee(s) are submorrespondence concerning this matter to the Levin Mahamana (Name of Person) (Name of Person) (Name of Person) (Name of Person) (Name of Status



FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED

09 MAY 12 PM 4:00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

March 31, 2009

KEVIN MAHON 555 NE 15TH ST APT 10C MIAMI, FL 33132

SUBJECT: KJ MAHON CONSULTING, LLC

Ref. Number: L08000071991

We have received your document for KJ MAHON CONSULTING, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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) 245-6855.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 209A00010809

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS 09 MAY 12 AM .9: 46

 The name of a limited liability company is 	
K) Mahov Consulting LL	<u> </u>
2. The Articles of Organization were filed on	and assigned document number
3. The date the dissolution was approved: March	1, 2009
4. A description of occurrence that resulted in the limi 608.441, Florida Statutes, (copy 608.441 on back of	ited liability company's dissolution pursuant to section over letter).
Pursuant to 608,441(1)(c)	, Plorida Statutes, all the
members (1) have provided th	uir written consent to
dissolve the limited liabili	4 company's affairs.
	
	limited liability company have been paid or discharged.
Adequate provision has been made for the	debts, obligations and liabilities pursuant to s. 608.4421.
All remaining property and assets have been distrib rights and interests.	uted among its members in accordance with their respective
7. CHECK ONE:	
There are no suits pending against the com	pany in any court.
Adequate provision has been made for the entered against it in any pending suit.	satisfaction of any judgment, order or decree which may be
Signatures of the members having the same percentage of	f membership interests necessary to approve the dissolution:
Signature	Printed Name
anson	Kevin J Mahon

•	