L 0 8 000 106 996

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
	-	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



900258977209

04/21/14--01029--009 **25.00

J. STAVETS APR 24 2014



COVER LETTER

TO: Registration Section

Division of Corporations

SUBJECT: BUNGALOWS OF KENWOOD, 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:

RONALD F GOFRANK
(Name of Person)

BUNGALOWS OF KENWOOD,
(Firm/Company)

3142 3RD AVE N

SAINT PETERSBURG, FL 33713
(City/State and Zip Code)

For further information concerning this matter, please call:

RONALD F. GOFRANK at (727) 321-2112

(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/COURIER ADDRESS:

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

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liability company is BUNG-ALOWS OF KENWOOD, LLC		
2.	The Articles of Organization were filed on 11/17/2008 and assigned		
	document number <u>L08000106996</u>		
3.	. The delayed effective date the dissolution if not effective on the date of filing: N/A (effective date cannot be prior to or more than 90 days later than date document is received for filing)		
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). ALL MEMBERS OF THE LIMITED LIABILITY		
	HAVE GIVEN WRITTEN CONSENT TO DISOLUTION,		
	AND ALL MEMBERS HAVE RESIGNED.		
5.	If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs: ROHALD F GOFRANK 3142 3RD AUE N SAINT PETERSBURG, FL 33713		
6. lis	Signature of an authorized person or if there are no members, the signature of the person appointed and sted above to wind up the company's activities and affairs:		
<u> </u>	Signature RONALD F. GOFRENIA Signature Printed Name FILING FEE: \$25.00		
	ORIDA		