

#L08000117033

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

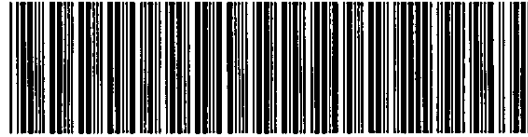
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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03/18/15--01005--023 **25.00

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2015 MAR 18 PM 2:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALLY
EXAMINER
APR 13 2015

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: High 5 For Kids
(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:

Holly Baillings
(Name of Person)

(Firm/Company)

14540 NW SR 45
(Address)

High Springs, FL 32543
(City/State and Zip Code)

For further information concerning this matter, please call:

Holly Baillings at (352) 278-8151
(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

FILED

2015 MAR 18 PM 2:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is

High 5 For Kids L.L.C.

2. The Articles of Organization were filed on 12/29/2008 and assigned

document number 608000117033

3. The delayed effective date the dissolution if not effective on the date of filing: _____
(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).

The company never opened -

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

Holly Billings

14540 NW 6245

High Springs, FL 32643

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:

Holly Billings
Signature

Holly Billings
Printed Name

FILING FEE: \$25.00