

L09000097557

(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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SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 DEC 18 PM 4:43

DEC 23 2014
J. HARRIS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: K & L PROPERTIES OF LEE COUNTY 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:

KEVIN LAVRACK

(Name of Person)

(Firm/Company)

1444 ARGYLE DRIVE

(Address)

FORT MYERS, FL 33919

(City/State and Zip Code)

For further information concerning this matter, please call:

KEVIN LAVRACK

(Name of Person)

239

694-8583

at ()

(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
K & L PROPERTIES OF LEE COUNTY LLC
2. The Articles of Organization were filed on 10/9/2009 and assigned
document number L09000097557
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).
Sale of all properties held by LLC.

5. If there are no members, enter the name and address of the person appointed to wind up the company's
activities and affairs: KEVIN R. LAVRACK
1444 ARGYLE DR
FT. MYERS, FL 33919

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:

Kevin R. Lavrack
Signature

KEVIN R. LAVRACK
Printed Name

FILING FEE: \$25.00

**FILED
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