

LO9000110961

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

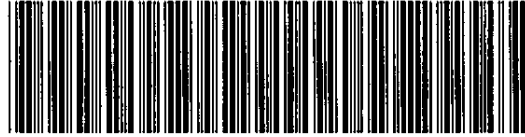
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



700271089957

04/06/15--01046--014 \*\*25.00

FILED

2015 APR -6 PM 2:55

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APR 21 2015  
J. HARRIS

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Kreamer Ave 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:

Katherine Oyama, MGRM

(Name of Person)

(Firm/Company)

30 Kreamer Ave

(Address)

Tarpon Springs, FL 34689

(City/State and Zip Code)

For further information concerning this matter, please call:

Kathy Oyama

(Name of Person)

at 727 741-1672

(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  
Kreamer Ave LLC
2. The Articles of Organization were filed on Nov 17, 2009 and assigned  
document number 209000110961
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 LLC was protecting one rental property. It is no longer necessary as we will not  
deed the property to the 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: Oliver Oyama
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:

Katherine Oyama  
Signature

Katherine A. Oyama, MGRM  
Printed Name

**FILING FEE: \$25.00**

FILED  
2015 APR -6 PM 2:55  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA