

L100000053788

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

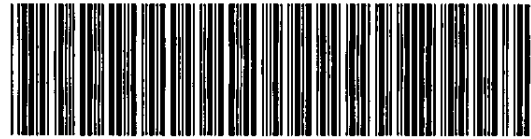
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800261631988

06/25/14--01006--013 **25.00

EFFECTIVE DATE

6-30-14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

14 JUN 25 PM 3:07

FILED

JUN 26 2014

T. BROWN

COVER BETTER

TO: Registration Section
Division of Corporations

SUBJECT: KB Fitness Systems, 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:

Carrie A. Kukuda
(Name of Person)

KB Fitness Systems, LLC
(Firm/Company)

3601 Parkway Blvd. (Address) ^(was...) 3134 Lois Ct.
Land O'Lakes, FL

Land O'Lakes, FL 34639
(City/State and Zip Code) ³⁴⁶³⁹

For further information concerning this matter, please call:

Carrie Kukuda at 813, 416-7352
(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

EFFECTIVE DATE

6-30-14

FILED

14 JUN 25 PM 3:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is

KB Fitness Systems, LLC

2. The Articles of Organization were filed on May 18, 2010 and assigned

document number 410000053788

3. The delayed effective date the dissolution if not effective on the date of filing: 6/30/14
(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).

closing business
agreed between both Members/Managers
Carrie Kukuda & Alicia Stoger

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

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:

Carrie A. Kukuda
Signature

Carrie A. Kukuda
Printed Name

FILING FEE: \$25.00