

L1000009585

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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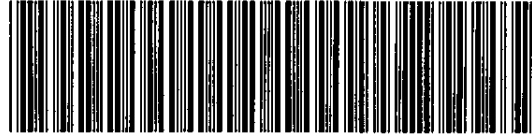
(Business Entity Name)

(Document Number)

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2015 JAN 23 PM 5:47  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

FEB 04 2015  
J. BRUCE

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Kenneth Everhart 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:

Kenneth Everhart

(Name of Person)

Kenneth Everhart LLC

(Firm/Company)

3224 NW Roundhouse Dr.

(Address)

Arcadia, FL 34266

(City/State and Zip Code)

For further information concerning this matter, please call:

Kenneth Everhart

(Name of Person)

at ( 863 ) 494-2560  
(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

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TALLAHASSEE FLORIDA

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**ARTICLES OF DISSOLUTION  
FOR  
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is

Kenneth Everhart LLC

2. The Articles of Organization were filed on 9/14/2010 and assigned

document number L 10000095855

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).

Loss of sufficient funds/contracts to continue.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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


Kenneth Everhart

3224 NW Roundhouse Dr.

Arcadia, FL 34266

\_\_\_\_\_

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:

  
\_\_\_\_\_  
Signature

Kenneth Everhart  
\_\_\_\_\_  
Printed Name

**FILING FEE: \$25.00**

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TALLAHASSEE, FLORIDA

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