

Lil 0006 9388L

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

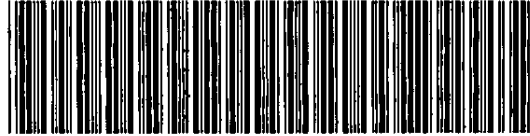
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200284868252

04/25/16--01020--029 **25.00

FILED
16 APR 25 AM 9:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Dissolution of Karak Enterprises, LLC

DOCUMENT NUMBER: L11000093886

The enclosed **Notice of Limited Liability Company Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Alan Billups

(Name of Contact Person)

Karak Enterprises, LLC

(Firm/Company)

7451 SW 19th Street

(Address)

Plantation, FL 33317

(City/State and Zip Code)

For further information concerning this matter, please call:

Alan Billups

(Name of Contact Person)

at (954)

(Area Code)

261-5421

(Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$30 Filing Fee &
Certificate of Status

☐ \$55 Filing Fee &
Certified Copy

(Additional copy is enclosed)

☐ \$60 Filing Fee,
Certificate of Status &
Certified Copy

(Additional copy is enclosed)

MAILING ADDRESS:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

Amendment 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

Karak Enterprises, LLC

2. The Articles of Organization were filed on 08/15/2011 and assigned

document number L11000093886

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)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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).

Consent of all the members

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:



Signature

Alan Billups

Printed Name

FILING FEE: \$25.00

FILED
16 APR 25 AM 9:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA