## L11000 175110

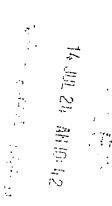
(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						

Office Use Only



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07/24/14--01006--013 \*\*25.00



## COVER LETTER

TO:	Registration Section Division of Corporations					
VACATION HOME RENTALS LLC SUBJECT:						
3000	(Name of Limited Liability	y Company)				
The end	osed Articles of Dissolution and fee(s) are submitted for fili	ng.				
Please 1	turn all correspondence concerning this matter to the follow	ing:				
	PRADEEP KINGER					
	(Name of Perso	n)				
THE KINGER FAMILY LIMITED PARTNERSHIP						
(Firm/Company)						
1921 S Palmetto Ave						
	(Address)					
	Daytona Beach, FL 32119	• ,				
	(City/State and Zip	Code)				
For furt	er information concerning this matter, please call:					
PRADEEP KINGER		718 869-0131				
	(Name of Person)	(Area Code & Daytime Telephone Number)				
Enclosed	s a check for the following amount:					
J		55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)				
	MAILING ADDRESS:	STREET/COURIER ADDRESS:				
	Registration Section Division of Corporations	Registration Section Division of Corporations				
	P.O. Box 6327	Clifton Building				
	Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301				

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

The name of a limited liability company is     VACATION HOME RENTALS LLC							
2.	The Articles of Organizatio	n were filed on 11/30	0/2011	and assigned			
	document number L11000		<del>_</del>				
3.	The delayed effective date t	e the dissolution if not effective on the date of filing: IMMIDIATE ive date cannot be prior to or more than 90 days later than date document is received for filing)					
4.	A description of occurrence 605.0707, Florida Statutes, ( NO LONGER IN BUSIN	copy 605.0707 on bac	nited liability company's dis k cover letter).	solution pursuant	to section		
					<u></u>		
5	If there are no members, en	ter the name and addre	ess of the person appointed to	wind up the com	nany's		
٥.	f there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:  Pradeep Kinger (The Kinger Family Limited Partnership)						
		1921 S PALMETTO AVE					
		SOUTH DAYTO	NA BEACH				
		FLORIDA 32119			resed resed		
6. Iis	Signature of an authorized pated above to wind up the cor	person or if there are n npany's activities and	o members, the signature of affairs:	the person appoin	ted and:		
Signature			PRADEEP KINGER				
			Printed Printed				

FILING FEE: \$25.00