

L11000141457

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

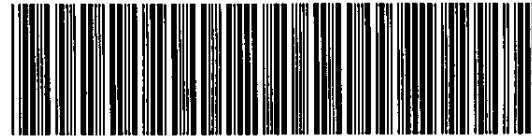
(Business Entity Name)

(Document Number)

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

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FILED  
2014 JAN -7 PM 3:53  
FEB 10 2014  
FEB 10 2014

B. BOSTICK

FEB 10 2014

EXAMINER

KIP, LLC  
2631-A NW 41<sup>st</sup> Street  
Gainesville, FL 32606  
(865) 363-5464

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February 3, 2014

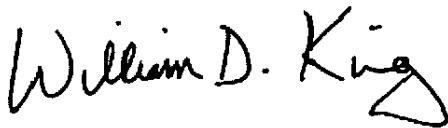
Florida Department of State  
c/o Division of Corporations  
Corporate Filings  
P.O. Box 6327  
Tallahassee, FL 32314

RE: KIP, LLC  
Number: L11000141457

Dear Sir or Madam:

As the managing member of the above-referenced limited liability company, I want to apprise you that it has been dissolved in 2013. Accordingly, no 2014 annual report will be filed. Please forward any additional documents required to formally dissolve this entity. I have enclosed the documents that I understand are required to dissolve this LLC. Thank you.

Sincerely,  
**KIP, LLC**



William D. King, CPA, CFP®, CHBC  
bking@aba-advisors.com

WDK:blc

xc: Ryan King  
Meg King

2014 JAN -7 P 3:53  
RECEIVED  
CORPORATE FILINGS  
DIVISION OF CORPORATIONS  
FLORIDA DEPARTMENT OF STATE

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** KIP, 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:

William D. King

(Name of Person)

KIP, LLC

(Firm/Company)

2631-A NW 41st Street

(Address)

Gainesville, FL 32606

(City/State and Zip Code)

For further information concerning this matter, please call:

William D. King

(Name of Person)

at ( 865 ) 363-5464

(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

KIP, LLC

2. The Articles of Organization were filed on 12/14/2011 and assigned  
document number L11000141457

3. The delayed effective date the dissolution if not effective on the date of 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).

ceased business operations

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

William D. King

Printed Name

WILLIAM D. KING

**FILING FEE: \$25.00**

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CLERK OF DISTRICT COURT  
JACKSONVILLE, FLORIDA