

L120000015898

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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2015 JAN -9 PM 1:43

SECRETARY OF STATE
TALLAHASSEE FLORIDA

JAN 20 2015
D. BRUCE

EFFECTIVE DATE 01/10/15

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: REEF GROUP HOLDINGS 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:

ILAN KEDEM

(Name of Person)

(Firm/Company)

1423 SE 10TH STREET, SUITE 1

(Address)

CAPE CORAL, FL, 33990

(City/State and Zip Code)

For further information concerning this matter, please call:

ILAN KEDEM

(Name of Person)

at (

754

246-3465

(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
REEF GROUP HOLDINGS LLC
2. The Articles of Organization were filed on 02/02/2012 and assigned
document number L12000015898
3. The delayed effective date the dissolution if not effective on the date of filing: 1/10/2015
(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).
NO ASSETS - MANAGER MEMBER VOTED TO CLOSE LLC
5. If there are no members, enter the name and address of the person appointed to wind up the company's
activities and affairs: NIV SOFER

6. Signature of an authorized person or if there are no members, the signature of the person appointed as
listed above to wind up the company's activities and affairs:

[Signature]
Signature

NIV SOFER
Printed Name

FILING FEE: \$25.00

EFFECTIVE DATE 01/10/15

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

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