

U12000091027

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

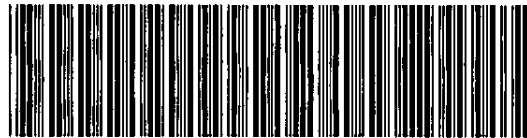
(Business Entity Name)

(Document Number):

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

657



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 9, 2014

R.K.M. DEVELOPMENT CORP
147 2ND AVENUE SOUTH SUITE 400
ST PETERSBURG, FL 33701

SUBJECT: RKM TRINITY, LLC
Ref. Number: L12000091027

We have received your document for RKM TRINITY, LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The effective date must be specific and cannot be prior to the date of filing.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 614A00009963

R.K.M. Development Corp.

LETTER OF TRANSMITTAL

April 28, 2014

TO: Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Sent Via US Mail

We are sending the following items(s):

<u>Company</u>	<u>Description</u>
RKM Trinity, LLC	Cover Letter Articles of Dissolution Check #1092

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: RKM Trinity, 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 C. Lloyd

(Name of Person)

RKM Trinity, LLC

(Firm/Company)

147 Second Avenue South, Suite 400

(Address)

Saint Petersburg, FL 33701

(City/State and Zip Code)

For further information concerning this matter, please call:

William C. Lloyd

(Name of Person)

at (727) 895-2150

(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
RKM Trinity, LLC
2. The Articles of Organization were filed on July 13, 2012 and assigned
document number L12000091027
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).
Unanimous consent of all 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

William C. Lloyd

Printed Name

FILING FEE: \$25.00

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TALLAHASSEE FLORIDA