

(Requestor's Name)				
(Address)				
(Add	dress)			
(City	y/State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificate:	s of Status		
Special Instructions to Filing Officer:				
		•		

Office Use Only



700256235167

02/04/14--01030--004 **25.00



B. BOSTICK

FEB 2 0 2014

EXAMINER

COVER LETTER

TO:	TO: Registration Section Division of Corporations					
KCM Global Enterprises LLC SUBJECT:						
SUBJE		Liability Company)				
The enclosed Articles of Dissolution and fee(s) are submitted for filing.						
Please return all correspondence concerning this matter to the following:						
	Processing Department					
(Name of Person)						
	My Corporation Business Services, Inc.					
	(Firm/Company)					
	23586 Calabasas Road, Suite 102					
(Address)						
	Calabasas, CA 91302					
(City/State and Zip Code)						
For further information concerning this matter, please call:						
	Processing Department	977 692-6772 at ()				
	(Name of Person)	(Area Code & Daytime Telephone N	umber)			
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)		f Dissolution & is enclosed)				
	MAILING ADDRESS: STREET/COURIER ADDRES		DRESS:			
	Registration Section Registration Section Division of Corporations Division of Corporations					
	P.O. Box 6327	Clifton Building				
	Tallahassee, FL 32314	2661 Executive Center Ci Tallahassee, FL 32301	rcle			

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liability company is KCM Global Enterprises LLC		·			
2.	The Articles of Organization were filed on 07 document number L13000106424	7-/29/2013	and assigned			
3.	The delayed effective date the dissolution if n	ne 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 sectio 605.0707, Florida Statutes, (copy 605.0707 on back cover letter). upon the written consent of all the members of the limited liability company					
5.	If there are no members, enter the name and a activities and affairs:	address of the person appointed	I to wind up the company's			
6.	Signature of an authorized person or if there above to wind up the company's activities and at	are no members, the signature	of the person appointed and listed			
au	Signature		ed Name			
2	Kim & Boy 2/13/14	Kim Boyd, Member				
	_					

FILING FEE: \$25.00



February 5, 2014

POST-FORMATION FILINGS MY CORPORATION BUSINESS SERVICES, INC. 23586 CALABASAS ROAD, SUITE 102 CALABASAS, CA 91302

SUBJECT: KCM GLOBAL ENTERPRISES LLC

Ref. Number: L13000106424

We have received your document for KCM GLOBAL ENTERPRISES LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes. The proper form is enclosed for your convenience.

Please return 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.

Barbara Bostick Regulatory Specialist II

Letter Number: 014A00002676