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2018 MAR 13 PM 2: 04
SECRETARY OF STATE
TALL ARE SEPTEMBER.

WAR 1 4 7019 J. HARRIS

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: KMAA Investments, LC			
(Name of Limited Liability Company)			
The enclosed Articles of Dissolution and fee(s) are submitted f	for filing.		
Please return all correspondence concerning this matter to the	following:		
Ingre Diana RosenquisT			
(Name of Person)			
(Firm/Co	ompany)		
_ 1260 garden Rol,	(Western + L 33326 - 1000)		
Weston F	33326		
(City/State and Zip Code)			
For further information concerning this matter, please call:			
Inger Diava Joseph VIST	at 305, 992 4425		
(Name of Person)	(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:	STREET/COURIER ADDRESS:		
Registration Section	Registration Section		
Division of Corporations	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

1.	The name of a limited liability company is KMAA INVESTMENT, UC
2.	The Articles of Organization were filed on $06/30/2014$ and assigned
	document number <u>L 1400010 42</u> 02
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) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
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).
	KMAA Investments uc was owner of a
	property which was QCD to Ingen
	Diana Ruseravist - december 7017
	ι -
5.	If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs: INCIPLE DIQUE FORMOVIST
	_1260 Garden (Cd
	Westen FZ 33326
6. lis	Signature of an authorized person or if there are no members, the signature of the person appointed and ted above to wind, up the company's activities and affairs:
	Mugh Ingen Diane Rosmoviss
	Signature Printed Name FILING FEE: \$25.00
	SSEE FLO