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| (Re | questor's Name) | |
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| (Cit | ty/State/Zip/Phon | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | ısiness Entity Naı | m e) |
| (Document Number) | | |
| Certified Copies | _ Certificate: | s of Status |
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2016 DEC 22 P # 57
SECRETARY OF STATE

nec 23 2016

COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT

BOOS-KISSINGBOWER, 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:

Robert D. Boos

(Name of Person)

Boos Development Group, Inc

(Firm/Company)

410 Park Place Blvd, Suite 100

(Address)

Clearwater, FL 33759

(City/State and Zip Code)

For further information concerning this matter, please call:

Michael Korcheck

(Name of Person)

.,727

669-2900

(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

101551

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

| The name of a limited liability comp BOOS-KISSINGBOWER, LLC | pany is |
|---|---|
| 2. The Articles of Organization were f | iled on and assigned |
| document number L15000076428 | |
| (effective date cann | lution if not effective on the date of filing: ot be prior to or more than 90 days later than date document is received for filing) does not meet the applicable statutory filing requirements, this date will not be on the Department of State's records. |
| 4. A description of occurrence that res 605.0707, Florida Statutes, (copy 60 | ulted in the limited liability company's dissolution pursuant to section 5.0707 on back cover letter). |
| The LLC sold its assets and no longer had | as any business to conduct. |
| | |
| | |
| | SE TALI |
| 5. If there are no members, enter the na activities and affairs: | ame and address of the person appointed to wind up the companys |
| | |
| | ORXI ST |
| | |
| 6. Signature of an authorized person of listed above to wind up the company's | r if there are no members, the signature of the person appointed and activities and affairs: |
| What J. Praginature | Robert D. Boos, Managing Member |
| Signature Printed Name | |

FILING FEE: \$25.00