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(Re	equestor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Document Number)		
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





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COVER LETTER

TO:

Registration Section Division of Corporations

DHKSK REALTY 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:

(Name of Person)	
(Firm/Company)	
220 Humphrey St., Unit 203	
(Address)	
Marblehead, MA 01945	
(City/State and Zip Code)	

For further infor

David H. Kauder

(Name of Person)

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 DHKSK REALTY LLC
2.	The Articles of Organization were filed on and assigned and assigned
	document number L15000141474
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).
	This Limited Liability Company has ceased doing business with the proper disbursement of it's assets and
	has no debts and no creditors.
5.	If there are no members, enter the name and address of the person appointed to wind up the company's
	activities and affairs:
5. list	Signature of an authorized person or if there are no members, the signature of the person appointed and led above to wind up the company's activities and affairs:
(A ROMANUM David H. Kauder, AMBR
	rignature Printed Name

FILING FEE: \$25.00

Notice of Limited Liability Company Dissolution

NOTE: This page is optional

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company: DHKSK REALTY LLC
Document number of Limited Liability Company is: L15000141474
Date of dissolution was: 10/31/2017
Description of information that must be included in a written claim:
Name and Address of Claimant, date of Claim, and specifics and amount of Claim.
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
220 Humphrey St., Unit 203, Marblehead MA 01945
A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.
David H. Kauder, AMBR
Printed Name of the Person Filing Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00