(Requestor's Name)	
(Address)	
(Address)	300348997703
(City/State/Zip/Phone #)	
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(Document Number)	07/27/20 -01089 -018 - + €5.00
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TO: Registration Section **Division of Corporations**

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SUBJECT: KLU, LLC _____ DOCUMENT NUMBER:

The enclosed Notice of Limited Liability Company Dissolution and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

	(Name of C	Contact Person)			
Blackbird Services, Inc					
(Firm/Company)					<u>172</u>
410 S. Cedar Ave				- 020	-
	(Ad	dress)		در 1	
Tampa, FL 33611					
	(City/Stat	e and Zip Code)		30	
For further informat	ion concerning this matt	er, please call:			
Antoine Matar		at ()	3066		
(Name of	Contact Person)		Daytime Telephone N	lumbe)
Enclosed is a check	for the following amour	nt:			
■\$25 Filing Fee	□\$30 Filing Fee & Certificate of Status	\$55 Filing Fee & Certified Copy (Additional copy is enclosed)	\$60 Filing Fee, Certificate of Status Copy (Additional copy is enclosed)	& Ce	ertified
<u>Mailing Address:</u> Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		<u>Street Address:</u> Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			



FLORIDA DEPARTMENT OF STATE Division of Corporations

October 6, 2020

BLACKBIRD SERVICES, INC. 410 S. CEDAR AVE TAMPA, FL 33611

SUBJECT: KLU, LLC Ref. Number: L15000184076

We have received your document for KLU, 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):

The limited liability company must complete and submit a Voluntary Dissolution along with the attached Notice of Dissolution in order to dissolve a Florida limited liability company on our records. The fee to file both the Voluntary Dissolution and Notice of Dissolution is \$25.

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) 245-6050.

Diane Cushing Senior Section Administrator

Letter Number: 720A00019476

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FLORIDA DEPARTMENT OF STATE Division of Corporations

November 9, 2020

BLACKBIRD SERVICES, INC. 410 S CEDAR AVE TAMPA, FL 33611

SUBJECT: KLU, LLC Ref. Number: L15000184076

We have received your document for KLU, 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):

You still have not completed the proper form. However, your company has been administratively dissolved for failure to file the annual report as of September 25th. If you still wish to voluntarily dissolve please complete the attached form and return it to our office for processing.

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) 245-6050.

Diane Cushing Senior Section Administrator

Letter Number: 520A00022349

ARTICLES OF DISSOLUTION FOR -A LIMITED LIABILITY COMPANY

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I.	The name of a limited liability company is KLW, LLC	
2.	The Articles of Organization were filed on $10/29/2015$ and assigned	
	document number <u>L15000184076</u>	
3.	The delayed effective date the dissolution if not effective on the date of filing: 1112020 (effective date cannot be prior to or more than 90 days later than date document is received for filing) <u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not b listed as the document's effective date on the Department of State's records.	oc
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).	:
	(losed operation 3	12 <u>1</u> 2
	<u>حمد المحمد المحمد </u>	
5,	If there are no members, enter the name and address of the person appointed to wind up the company's $\overset{\frown}{=}$	4010 110
	activities and affairs:	*
6. ab	Signature of an authorized person or if there are no members, the signature of the person appointed and list pove to wind up the company's activities and affairs:	ted

A. Meenakeri Stgnature

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Mengkshi Annamalai

Printed Name

FILING FEE: \$25.00