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(Requestor's Name)						
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(Document Number)						
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1. C. S. I. S. I.

# **COVER LETTER**

SUBJECT:	KINDBODY LLC		
	(Name of Limited Liability Company)		
The enclosed Arti	eles of Dissolution and fee(s) are submitted for filing		
Please return all e	orrespondence concerning this matter to the following:		
	Darren Crawford		
_	(Name of Person)		
_	Truth Co (Firm/Company)		
_	(Firm/Company)	201 	
_	1980 812 37	9 <b>AP</b> 1	
	Boulder CO 80302	2019 APR 1 0 F SEGNELATION TALLAHASSEE	FILED
_	(City-State and Zip Code)	PH 5: 44	
The friether inform	ation concerning this matter, please call:		
Darr	(Name of Person)  at (LIS) 517-PS  (Area Code & Daytime Telephone		
Enclosed is a check	for the following amount:		
\$25,00 FT	ling Fee and Certificate of Dissolution		

### 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

<u> </u>	my ccc	2/2/2016		<del></del> -
2. The Articles of Organiz	_		and assigned	
document number	922 0000 91	<b>b</b> 5		
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(effe	late the dissolution if not eff	ore than 90 days later than da	ite document is réceived l	for filing)
histed as the document's	d in this block does not meet the effective date on the Departme	nt of State's records.	ig requirements, this da	ne win nocce
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4. A description of occurr 605,0707, Florida Statu	ence that resulted in the lim tes. (copy 605.0707 on back	cover letter).	dissolution pursuan	r to section
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5. If there are no members	s, enter the name and addres	ss of the personappointe	<u>් දා</u> ed to wind up thමලබ	mp <b>an</b> vis
activities and affairs:	Darren	Crawford	्रे हिंदू नुस्कार	
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<ol> <li>Signature of an authori listed above to wind up the</li> </ol>	zed person or if there are no e company's activities and a	omembers, the signature Mairs:	of the person appor	nted and
			_	4
July W	My S	Darren	Crawfor	A .
Signatu	re	Prin	ited Name	
	J FILING	FEE: \$25.00		