11600046377

(Red	questor's Name)			
(Add	dress)			
(Add	dress)			
(City	//State/Zip/Phon	e #)		
PICK-UP	WAIT	MAIL		
(Bus	siness Entity Nar	me)		
(Document Number)				
Certified Copies	Certificate	s of Status		
Special Instructions to Filing Officer:				
<u> </u>				

Office Use Only



300309456763

02/26/18--01042--004 **25.00

18 FEB 26 AM 9: 0
SECRETARY OF STATE
TALLAHASSEF FLORIN.

K. SALY FEB 27 2018

COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT

Key Home Designs, 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:

Kathleen A. Mathews-Plunkett (Name of Person) Key Home Designs, LLC (Firm/Company) 136 Golden Gate Pt. #302 (Address) Sarasota, FL 34236

(City/State and Zip Code)

For further information concerning this matter, please call:

Kathleen Mathews-Plunkett

,,941

320-1003

(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:

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 lia Key Home Designs, LLC	bility company is		SECRETARY OF STALLAHASSEE, FL
2. The Articles of Organizat	ion were filed on $\frac{03/07/20}{}$	16	and assigned
document number 1.16000	0046377		
Note: If the date inserted i	ive date cannot be prior to or mo	re than 90 days later than date de applicable statutory filing re	ocument is received for filing) quirements, this date will not be
I. A description of occurren 605,0707, Florida Statutes	ce that resulted in the limits, (copy 605.0707 on back	ted liability company's dis	solution pursuant to section
•	TO OWNER'S RETIREME	,	
5. If there are no members, activities and affairs:	enter the name and address Kathleen A. Mathews-Pl	• ••	o wind up the company's
activities and arrans.	136 Golden Gate Pt. #30	2	
	Sarasota, FL 34236		
5. Signature of an authorize isted above to wind up the c	company's activities and af	members, the signature of fairs:	the person appointed and
othler A. Nati	reus- Plunkett	Kathleen A. Mathews-Plui	
Signature		Printed Name	

FILING FEE: \$25.00