Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of ail pages of the document.

(((H190001413763)))



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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

ACCOUNT Name : DEAN, MEAD, EGERTON, BLOODWORTH, CAPOUANO & BOZARTH, P.A.

Account Number: 076077001702

DEAN, BEEN ON, BUSINESS, BESTELL, CALCULATION OF COMMITTEE OF COMMITTE

Phone : (407)841-1200 Fax Number : (407)423-1831

LLC DISSOLUTION OR WITHDRAWAL KELLYCO INTERNATIONAL, LLC

Certificate of Status	U
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

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Corporate Filing Menu

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(((1119000141376 3))) ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

l.	The name of a limited liabili	ty company is				
	Kellyco International, LLC					
2.	The Articles of Organization	were filed on	May 2, 2016	and a	nd assigned	
	document numberL160000					
3.	The delayed effective date the (effective Note: If the date inserted in the listed as the document's effect	date cannot be prically also block does no	or to or more than 90 days li it meet the applicable stat	ater than date documen tutory filing requiren	t is receive nents, this	d for filing) date will not
4.	A description of occurrence 605.0707, Florida Statutes, (that resulted in	the limited liability co	ompany's dissoluti	on pursua	ant to section
	Consent of the sole member	Jopy 603.0707	on back cover letter).			· .
						-
5.	If there are no members, enter the name and address of the person appointed to wind up the company activities and affairs: David C. Auerbach, Manager					
		1085 Belle Av	/enue	·		
		Winter Springs, FL 32708				
6 li	Signature of an authorized patents above to wind up the cor	person or if the npany's activit	re are no members, the ies and affairs:	signature of the p	erson app	ointed and
,			David C. A	•	·	
حت	Signature	-		Printed Name	€ .	

FILING FEE: \$25.00

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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: Kellyco In	ternational, LLC	· · · · · · · · · · · · · · · · · · ·
Document number of Limited Liability Company is:	L16000084280	
Date of dissolution was: upon filing	_	
Description of information that must be included in a v	vritten claim:	0 W 0 V
Name of Claimant:		
Address of Claimant:		
Amount of Claim:		
Basis for Claim (attach a separate sheet, if necessary	ary):	
Mailing address where claims can be sent: (Claims can 1085 Belle Avenue		Corporations)
Winter Springs, FL 32708	<u> </u>	
A claim against the above named limited liability comclaim is commenced within 4 years after the filing of t	pany will be barred unless a p	roceeding to enforce the
David C. Auerbach Printed Name of the Person Filing	Signature of the	he Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00 (((I-119000141376 3)))