# L160002/2247

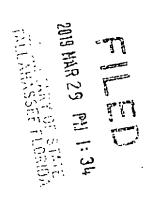
(Requestor's Name)				
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### **COVER LETTER**

TO: Registration Section
Division of Corporations

## KROHNE REAL ESTATE LLC

SUBJECT:

(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:

KEVIN REDLING					
(Name	of Person)				
HARDING BELL INTERNATION	NAL, INC				
(Firm/	Company)				
113 PONTOTOC PLAZA					
(Ac	idress)				
AUBURNDALE, FL 33823					
(City/State	and Zip Code)		<del></del>		
For further information concerning this matter, please call:			IALL M	2019 HAR	$T_i$
KEVIN REDLING	863	968-1010	3.5.7.5. 2.1.3.	R 29	*****
(Name of Person)		ode & Daytime Telephone	Number),		T
Enclosed is a check for the following amount:				<del></del> {	
■ \$25.00 Filing Fee and Certificate of Dissolution		ng Fee, Certificate of Disso Jopy (additional copy is er		34	

### 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 KROHNE REAL ESTATE LLC	is
2. The Articles of Organization were filed o	NOVEMBER 18TH, 2016 and assigned
document number L16000212247	
3. The delayed effective date the dissolution (effective date cannot be particular in this block does listed as the document's effective date on the	prior to or more than 90 days later than date document is received for filing) not meet the applicable statutory filing requirements, this date will not be
605.0707, Florida Statutes, (copy 605.070	in the limited liability company's dissolution pursuant to section 07 on back cover letter). 0701(2), ALL MEMBERS CONSENT TO THE DISSOLUTION
OF THE ENTITY.	
5. If there are no members, enter the name ε	and address of the person appointed to wind up the company's:
activities and affairs:	AR 29 R
,	EC STA
6. Signature of an authorized person or if th listed above to wind up the company's activities	ere are no members, the signature of the person appointed and ities and affairs:
H.Z.e.	HEIKO KROHNE
Signature	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: KROHNE REAL ES	TATE LLC	
Document number of Limited Liability Company is: L1600	00212247	
Date of dissolution was:		
Description of information that must be included in a writte	en claim:	
A detailed explanation of the claim including all facts and circumst	ances relating to said claim as well as any evidence	
providing for the validity of the claim. Additionally, it must be state	ed if the claim is admitted or not admitted, in whole	
or in part, and the relative amounts associated with such as	sertions.	
	2019	
	**************************************	
Mailing address where claims can be sent: (Claims cannot		
GIRHALDENWEG 7A		
ZUERICH 8048		
SWITZERLAND		
A claim against the above named limited liability company claim is commenced within 4 years after the filing of this n		
, c		
HEIKO KROHNE	-> A-Lac	
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