

L17000052145

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

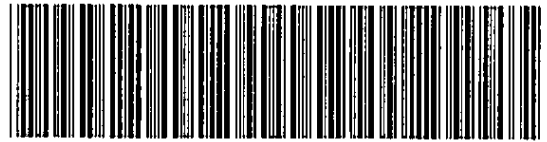
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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04/22/21--01011--027 **25.00

2022 APR 22 AM 6:34

O SIMMONS
JUN 11 2021

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GLK Electric 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:

Gary Krohn

(Name of Person)

(Firm/Company)

1309 NE 36th Lane

(Address)

Cape Coral , Florida 33909

(City/State and Zip Code)

For further information concerning this matter, please call:

Gary Krohn

(Name of Person)

239

339-3550

at (_____) _____

(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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is

GLK Electric LLC

2022 APR 22 AM 6:34

2. The Articles of Organization were filed on April 17 2021

SEC. 605.0707
TAL and assigned DATE
STATE, FL

document number _____

3. The delayed effective date the dissolution if not effective on the date of filing: april 30 2021
(effective date cannot be prior to or more than 90 days later than date document is received for filing)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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).

Loss of profit, unable to continue day to day operation of business. Loss of jobs and manpower due to covid.

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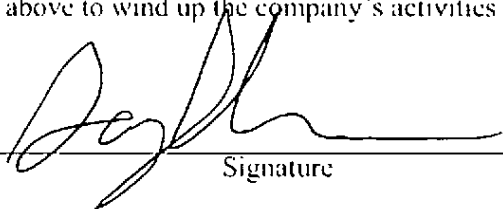
5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:

Gary Krohn

1309 NE 36th lane

Cape Coral Florida, 33909

6. Signature of an authorized person or if there are no members, the signature of the person appointed and listed above to wind up the company's activities and affairs:



Signature

Gary Krohn

Printed Name

FILING FEE: \$25.00