

L18 000101602

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

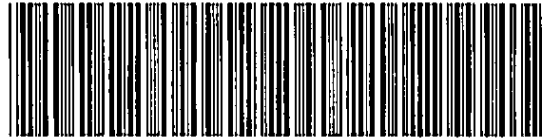
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600329413576

05/13/19--01016--015 **25.00

FILED

2019 MAY 13 P 11:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAY 24 2019
T. LEMMON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: : RICHARD KITZMILLER 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:

RICHARD KITZMILLER

(Name of Person)

: RICHARD KITZMILLER LLC

(Firm/Company)

1705 TREMONT CT

(Address)

SUN CITY CENTER, FL 33573

(City/State and Zip Code)

For further information concerning this matter, please call:

: RICHARD KITZMILLER at (813) 495-2604

(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**

FILED

1. The name of a limited liability company is
: RICHARD KITZMILLER LLC

2019 MAY 13 PM 4:45

2. The Articles of Organization were filed on 04/23/2018
document number L18000101602

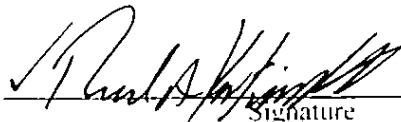
and assigned to the
CLERK OF THE
TALLAHASSEE, FLORIDA

3. The delayed effective date the dissolution if not effective on the date of filing: 05/31/2019
(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).
The Company has completed and closed all of the Company's contracts and business.

5. If there are no members, enter the name and address of the person appointed to wind up the company's
activities and affairs: N/A - The Member is Richard Kitzmiller

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

Richard A. Kitzmiller

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: RICHARD KITZMILLER LLC

Document number of Limited Liability Company is: L18000101602

Date of dissolution was: 05/31/19

Description of information that must be included in a written claim:

Name, address and telephone number of Claimant

Description and nature of claim

All relevant supporting documents

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

RICHARD KITZMILLER

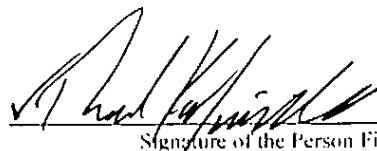
1705 TREMONT CT

SUN CITY CENTER, FL 33573

A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

RICHARD KITZMILLER

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