

L18000 102169

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

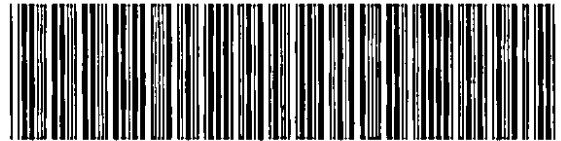
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000327197260

04/08/19--01015--001 **25.00

2019 APR -8 AM 10:31
FBI ALABAMA
FBI ALABAMA

2019 APR 8
CH. 10

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **SKJB, LLC**

(Name of Limited Liability Company)

2013 APR -8 AM 10:31
FILED
TALLAHASSEE, FL 32301

The enclosed Articles of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Christopher Knoll

(Name of Person)

(Firm/Company)

5515 Sea Biscuit Road

(Address)

Palm Beach Gardens, FL 33418

(City/State and Zip Code)

For further information concerning this matter, please call:

Christopher Knoll

(Name of Person)

at (**646**) **572-3517**

(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**

2018 APR -8 AM 10:31
FILED
CLERK OF COURT
STATE OF FLORIDA

1. The name of a limited liability company is
SKJB

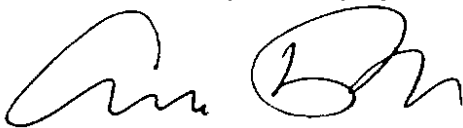
2. The Articles of Organization were filed on 4/23/18 and assigned
document number L18000102169

3. The delayed effective date the dissolution if not effective on the date of filing: 1/17/19
(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).
Underlying project was dropped and members chose not to pursue the business any further.

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

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

Christopher Knoll

Printed Name

FILING FEE: \$25.00