

L19 000260554

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

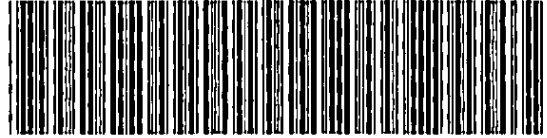
Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

J. HORNE

JUN 11 2022

Office Use Only



800385984238

04/20/22--01006--013 \*\*25.00

FILED  
2022 APR 20 PM 2:09  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Koch Design Group, 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:

Cathy Ann Koch  
(Name of Person)

(Firm/Company)

4610 Kensington Circle  
(Address)

Naples, FL 34119  
(City/State and Zip Code)

For further information concerning this matter, please call:

Cathy Ann Koch  
(Name of Person)

at ( 203 ) 800-1623  
(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

Koch Design Group, LLC

2. The Articles of Organization were filed on October 16, 2019 and assigned  
document number L19000260554

**FILED**  
2022 APR 20 PM 2:09  
SECRETARY OF STATE  
TALLAHASSEE, FL 32399

3. The delayed effective date the dissolution if not effective on the date of filing: April 30, 2022  
(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).

Death of Registered Agent

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

Cathy Ann Koch

4610 Kensington Circle

Naples, FL 34119

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:

Cathy Ann Koch  
Signature

Cathy Ann Koch  
Printed Name

**FILING FEE: \$25.00**