120000015787

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cil	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Ви	siness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	

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TO: Amendment Section Division of Corporations KASHII ANCESTRAL DESIGNS, LLC SUBJECT: __ L20000015787 DOCUMENT NUMBER: The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: ALEXA FANDINO (Name of Contact Person) KASHII ANCESTRAL DESIGNS, LLC (Firm/Company) 15155 WHITE WAQTAIL LANE (Address) WINTER GARDEN, FL 34787 (City/State and Zip Code) For further information concerning this matter, please call: ALEXA FANDINO (Area Code) (Daytime Telephone Number) (Name of Contact Person) Enclosed is a check for the following amount: ■ \$35 Filing Fee □ \$43.75 Filing Fee & □ \$43.75 Filing Fee & □ \$52.50 Filing Fee. Certificate of Status & Certificate of Status Certified Copy (Additional copy is Certified Copy (Additional copy is enclosed) enclosed) Mailing Address: Street Address:

Amendment Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Corporation:
The above named corporation is the subject of dissolution and the effective date of a dissolution is: $\frac{03/01/2021}{}$
(date filed with the Dept. if date specified in the Articles of Dissolution)
Description of information that must be included in a claim:
THE LIMITED LIABILITY COMPANY WRITTEN ABOVE IS NO LONGER ACTIVE IN THE STATE OF FLORIDA.
IF YOU HAVE ANY CLAIMS, PLEASE DO NOT HESITATE TO SEND THOSE TO THE ADDRESS LISTED BELOW:
15155 WHITE WAQTAIL LANE, WINTER GARDEN, FL 34787
Mailing address where written claims can be sent: (Claims cannot be sent to the Division of Corporations)
15155 WHITE WAQTAIL LANE, WINTER GARDEN, FL 34787
A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.
ALEXA FANDINO Printed Name of the Person Filing Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00

ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST:	The name of the corporation as currently filed with the Florida Department of State: KASHII ANCESTRAL DESIGNS, LLC		
SECOND:	The document number of the corporation (if known):		
THIRD:	The date dissolution was authorized:		
<u>Not</u>	Effective date of dissolution if applicable: 03/01/2021 (no more than 90 days after dissolution file date)		
	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.		
FOURTH:	Dissolution was approved by the shareholders, in the manner required by this chapter and the articles of incorporation.		
	· 2 <u>1</u>		
	MAR 29		
S	Signature: QUIRO ACOYUMO		
	(By a director, president of other officer - if directors or officers have not been selected; by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that tiduciary)		
	ALEXA FANDINO		
	(Typed or printed name of person signing)		
	MANAGER		
	(Title of person signing)		

Filing Fee: \$35