

121 0000 74033

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

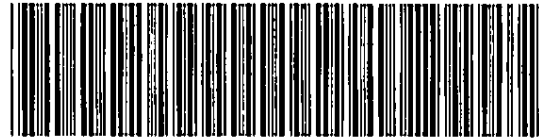
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600388559086

06/07/22--01009--021 **25.00

FILED

2022 JUN -7 PM 2:21

COURT CLERK

Dissolution

AUG 21 2022

D CUSHING

March 25, 2022

78 Kia Ora Blvd.
Mahopac, NY 10541

To Whom It May Concern:

I am writing to dissolve
KN Financial Services, LLC
L21 000074033. The person
who organized this company
in my name was dishonest.
Therefore, the company never
started.

Thank you in advance
for your consideration

Best Regards,
Chen Smith

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: KN Financial Services, 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:

Kim Smith
(Name of Person)
KN Financial Services, LLC
(Firm/Company)
13727 SW 152nd St 1147
(Address)
Miami, Florida 33177
(City/State and Zip Code)

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For further information concerning this matter, please call:

Kim Smith at 845, 729-6638
(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 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**

FILED
2022 JUN -7 PM 2:21
CLERK OF THE
COURT
STATE OF FLORIDA

1. The name of a limited liability company is

KN Financial Services, LLC

2. The Articles of Organization were filed on 2/11/21 and assigned

document number L21000074033

3. The delayed effective date the dissolution if not effective on the date of filing: _____

(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).

Business partners not honest. Business
never started. Partner was in
Florida and completed the paperwork
to start the LLC.

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

Kim Smith
78 Kia Ora Blvd
Mahopac, NY 10541

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

Kim Smith
Printed Name

FILING FEE: \$25.00