L22000335350

(Re	questor's Name)			
(Acc	questor s Harrie)			
	ldraca)			
(Address)				
(Address)				
(Cit	ty/State/Zip/Phone	#)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nam	e)		
(Document Number)				
Certified Copies	_ Certificates	of Status		
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Special Instructions to Filing Officer:				

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COVER LETTER

TO: Registration Section

Div	rision of Corporations			
SUBJECT:	KTAP LLC			
SOBJECT.		ted Liability Company)		
The enclosed	d Articles of Dissolution and fee(s) are submit	tted for filing.		
Please return	all correspondence concerning this matter to	the following:		
	Katie Kanehl			
	(Nar	me of Person)		
	KTAP LLC			
	(Firm/Company)			
	1545 S Belcher Rd			
	(Address)			
	clearwater, Fl 33764			
	(City/Sta	ate and Zip Code)		
For further in	nformation concerning this matter, please call	:		
Ka	tie Kanehl	941 957-8525 at ()		
	(Name of Person)	at () (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:		Street Address:		
Registration Section		Registration Section Division of Corporations		
Division of Corporations P.O. Box 6327		The Centre of Tallahassee		
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810		
		Tallahassee, FL 32303		

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liabili	ty company is		
2.	The Articles of Organization	were filed on	22 and assigned	
	document number L2200033	5350		
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 605.0707, Florida Statutes, (that resulted in the lim	ited liability company's dissolution pursuant to section cover letter).	
	The wrong LLC name has been filed and another has already been opened with the correct one.			
5.	If there are no members, enter activities and affairs:	er the name and addres Katie Kanehl	s of the person appointed to wind up the company's	
		9324 Lake Chase Island Way, Tampa, Fl 33626		
6	Signature of an authorized n	erson or if there are no	members, the signature of the person appointed and liste	
at	ove to wind up the company	s activities and affairs:	memoers, the signature of the person appointed and fiste	
,	9-7 8 2 / 00/		Katie Kanehl	
Signature			Printed Name	

FILING FEE: \$25.00