

L23000250148

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

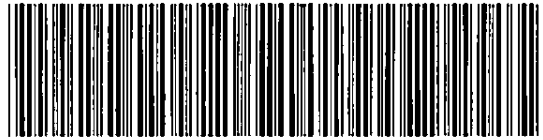
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

J. HORNE
APR 25 2024

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04/12/24 - 01015--003 *\$25.00

FILED
2024 APR 12 PM 12:22
CLERK OF STATE
OFFICE OF THE CLERK OF STATE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Kaia Consulting 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:

April Ince

(Name of Person)

Kaia Consulting LLC

(Firm/Company)

3909 45th terrace W #106

(Address)

Bradenton, Florida 34210

(City/State and Zip Code)

For further information concerning this matter, please call:

April Ince

405

7142863

at ()

(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
2024 APR 12 PM 12:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is

Kaia Consulting LLC

2. The Articles of Organization were filed on 5/22/2023 and assigned

document number L23000250148

3. The delayed effective date the dissolution if not effective on the date of filing: 4/2/2024
(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).

Company was dissolved based on receiving new employment

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

3909 45th Terrace W #106

Bradenton, FL 34210

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:

April Ince
Signature

April Ince
Printed Name

FILING FEE: \$25.00