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(Requestor's Name)					
(Add	dress)	_			
(Address)					
(City/State/Zip/Phone #)					
PICK-UP	☐ WAIT	MAIL			
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(Document Number)					
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ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liabi	ity company is			
	Kahlon Daisy National				·
2.	The Articles of Organization	n were filed on July 6, 202	3	_ and assigned	
	document number 1230003	21555	-		
3.	The delayed effective date (effective Note: If the date inserted in listed as the document's effective date in the date in the date in the document's effective date.	this block does not meet the	applicable statutory filing	aocument is received i	
4.	A description of occurrence 605.0707, Florida Statutes,	that resulted in the limite copy 605.0707 on back co	d liability company's di over letter).	ssolution pursuant	to section
	I no longer have time to manage	ge the LLC's affairs to keep it	t running efficiently so I h	ereby am dissolving	it.
					-
					- : - : - :
	If there are no members, en activities and affairs:	ter the name and address of Keith Birchfield	of the person appointed t	o wind up the com	ipany's
		1610 Belcher Rd S #33			
		Largo, FL 33771			
6. ab	Signature of an authorized pove to wind up the company	person or if there are no mo's activities and affairs:	embers, the signature of	the person appoin	ted and listed
	Kirt Berchfull	<i>!</i>	Keith Bir	chfield	

FILING FEE: \$25.00

COVER LETTER

Division of Corporations	H			
Kahlon Daisy National LLC				
SUBJECT: (Name of Limited Liability Company)				
The enclosed Articles of Dissolution and fee(s) are submitte	ed for filing.			
Please return all correspondence concerning this matter to the	ne following:			
Keith Birchfield				
(Name of Person)				
(Firm	(Company)			
1610 Belcher Rd S #33				
(A	ddress)			
Largo FL 33771				
(City/State	and Zip Code)			
For further information concerning this matter, please call:				
Keith Birchfield	727 4834758			
(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	Street Address: Registration Section Division of Corporations			
P.O. Box 6327 Tallahassee, FL 32314	The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			