

L 99 0000 03631

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

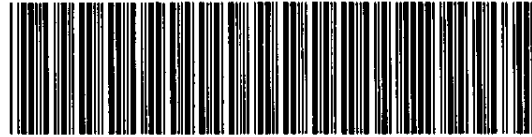
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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14 JAN 15 AM 10:38
TALLAHASSEE, FLORIDA

J. Shivers JAN 21 2014

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: KARROG, 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:

CAROL DENNIS

(Name of Person)

KARROG, LLC

(Firm/Company)

4641 WHITES POINT

(Address)

GENEVA, NY 14456

(City/State and Zip Code)

For further information concerning this matter, please call:

CAROL DENNIS

(Name of Person)

at (315) 521-7700

(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/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is

KARROG, LLC

2. The Articles of Organization were filed on JUNE 16, 1999 and assigned
document number L99000003631

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

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).

ASSETS WERE SOLD

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

CAROL DENNIS

4641 WHITES POINT

GENEVA, NY 14456

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

Printed Name

Carol Dennis

CAROL DENNIS

FILING FEE: \$25.00

16 JUN 15 PM 10:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REC-110-1103