

PO7000080461

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

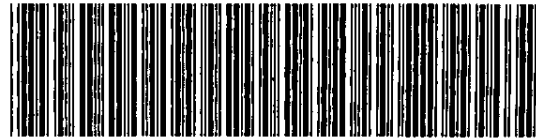
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800291080838

10/14/16--01008--029 **52.50

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2016 OCT 14 AM 11:49

OCT 17 2016

C LEWIS

KILLGORE, PEARLMAN, STAMP, ORNSTEIN & SQUIRES, P.A.

ATTORNEYS AND COUNSELORS AT LAW

ABBYE E. ALEXANDER
WILLIAM J. DENIUS
CHRISTOPHER M. HARNE
CHRISTOPHER W. HAYES ^{1,2}
AMBER L. HUMPHRIES
FRANK H. KILLGORE, JR. ¹
CHRISTOPHER D. LERCH

2 SOUTH ORANGE AVENUE, 5th FLOOR
ORLANDO, FLORIDA 32801
TELEPHONE: (407) 425-1020
FAX: (407) 839-3635

POST OFFICE BOX 1913
ORLANDO, FLORIDA 32802-1913

MARK L. ORNSTEIN ¹
CRAIG S. PEARLMAN ^{4,5}
JAMIE A. ROZZI ⁶
MICHAEL A. SEMANIE ³
GREY SQUIRES-BINFORD ¹
MARTIN F. STAMP ⁷

¹ ALSO MEMBER OF CALIFORNIA BAR
² ALSO HOLDS A MASTER OF BUSINESS ADMINISTRATION
³ CERTIFIED CIRCUIT COURT MEDIATOR
⁴ ALSO MEMBER OF DC BAR
⁵ ALSO MEMBER OF WEST VIRGINIA BAR
⁶ ALSO HOLDS AN LL.M. IN TAX LAW
⁷ ALSO MEMBER OF NEW YORK & TEXAS BAR

www.kpsos.com

Sender's email address:
ahumphries@kpsos.com

October 11, 2016

VIA U.S. MAIL

Amendment Section
Florida Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

**Re: Dissolution of Florida Corporation
TKL Associates, Inc. a/k/a TKL Associates, Inc.
Document No. P07000080461**

Dear Sir or Madam:

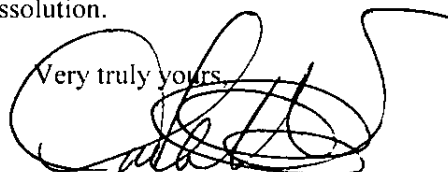
Please find enclosed the following:

1. Articles of Dissolution;
2. Notice of Corporate Dissolution;
3. My client's check in the amount of \$52.50 representing your filing fee for the Articles of Dissolution, a certified copy, and a Certificate of Status; and
4. A pre-addressed and stamped envelope to our office.

Please file the Articles of Dissolution and, thereafter, return a certified copy as well as a Certificate of Status to our office utilizing the enclosed envelope.

Also, in accordance with 607.1407(1), Florida Statutes, please file the enclosed Notice of Corporate Dissolution. It is my understanding that there is no filing fee associated with the Notice since it is being filed contemporaneous with the Articles of Dissolution.

Very truly yours,



Amber L. Humphries, Esquire

ALH
enclosures
cc: TKL Associates, Inc.

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Dissolution of: TKL ASSOICATES, INC. a/k/a TKL ASSOCIATES, INC.

DOCUMENT NUMBER: P07000080461

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Amber L. Humphries, Esquire

(Name of Contact Person)

Killgore, Pearlman, Stamp, Ornstein & Squires, P.A.

(Firm/Company)

2 South Orange Avenue, 5th Floor

(Address)

Orlando, Florida 32801

(City/State and Zip Code)

For further information concerning this matter, please call:

Amber L. Humphries, Esq.

(Name of Contact Person)

(407) 425-1020

at (

(Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status ☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) ☒ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)

MAILING ADDRESS:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

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

ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST: The name of the corporation as currently filed with the Florida Department of State:
TKL ASSOICATES, INC. a/k/a TKL ASSOCIATES, INC.

SECOND: The document number of the corporation (if known): P07000080461

THIRD: The date dissolution was authorized: October 5, 2016

Effective date of dissolution if applicable: _____
(no more than 90 days after dissolution file date)

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.

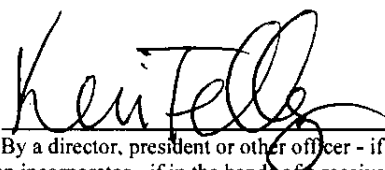
FOURTH: Adoption of Dissolution (CHECK ONE)

- ☒ Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.
- ☐ Dissolution was approved by the shareholders through voting groups.

The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:

The number of votes cast for dissolution was sufficient for approval by

(voting group)

Signature: 

(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)

Keri Tellez

(Typed or printed name of person signing)

President

(Title of person signing)

2016 OCT 14 AM 11:49
RECEIVED
FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

Filing Fee: \$35

Notice of Corporate Dissolution

SECRETARY OF STATE
DIVISION OF CORPORATIONS

2016 OCT 14 AM 11:49

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

This "*Notice of Corporate Dissolution*" is optional and is not required when filing a voluntary dissolution.

Name of Corporation: TKL ASSOICATES, INC. a/k/a TKL ASSOCIATES, INC.

Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the *Articles of Dissolution*.

Description of information that must be included in a claim:

- a. The name, mailing address, phone number and name of contact person on behalf of each Claimant; and
- b. Copies of Invoices that reflect and/or comprise the claim; and
- c. Brief description of basis of claim as well as a description of labor, materials, goods and/or services claimed to have been provided.

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

Keri Tellez, President

TKL ASSOICATES, INC. a/k/a TKL ASSOCIATES, INC.

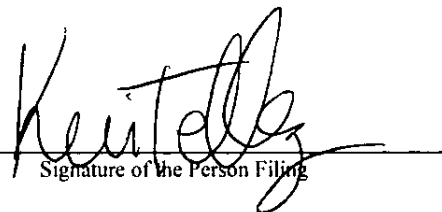
2791 Cypress Dome Court

St. Cloud, Florida 34772

A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Keri Tellez, President

Printed Name of the Person Filing


Signature of the Person Filing