

P12000023059

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

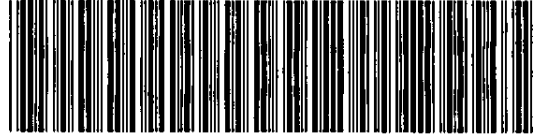
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

*Kathleen  
Campion gave  
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03/05/15--01019--019 \*\*10.00

01/21/15--01005--021 \*\*25.00

FILED  
15 FEB 27 AM 11:39  
OFFICE OF STATE  
ATTORNEY GENERAL  
TALLAHASSEE, FLORIDA

*Valdis.  
03/19/15  
DC*



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 10, 2015

KATHLEEN CAMPION  
KCAMPION, INC  
4268 TENNYSON WAY  
VENICE, FL 34293

SUBJECT: KCAMPION, INC  
Ref. Number: P12000023059

We have received your document for KCAMPION, INC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above entity is a Florida corporation and the document and fee submitted are for a Florida limited liability company. The correct form is enclosed and an additional filing fee of \$10.00 is due.

The fee to file articles of dissolution or a certificate of withdrawal is \$35. Certified copies are optional and are \$8.75 for the first 8 pages of the document, and \$1 for each additional page, not to exceed \$52.50.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Darlene Cornell  
Regulatory Specialist III

Letter Number: 915A00002756

RECEIVED  
15 FEB 27 AM 10:55  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** articles of dissolution

**DOCUMENT NUMBER:** P12000023059

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

Please return all correspondence concerning this matter to the following:

Kathleen Champion  
(Name of Contact Person)

K Champion Inc  
(Firm/Company)

4268 Tennyson way  
(Address)

Venice FL 34293  
(City/State and Zip Code)

For further information concerning this matter, please call:

Kathleen Champion at (941) 350-0171  
(Name of Contact Person) (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)
- Already sent \$25 so att check is \$10 per your letter*

**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:

X Champion Inc

SECOND: The document number of the corporation (if known): P 12000023059

THIRD: The date dissolution was authorized: Feb. 10, 2015

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

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)

FILED  
15 FEB 27 AM 11:39  
CLERK OF STATE  
AT TALLAHASSEE, FLORIDA

Signature: \_\_\_\_\_

*Ka*

(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)

Kathleen Champion  
(Typed or printed name of person signing)

CEO / President  
(Title of person signing)

**Filing Fee: \$35**