

L15 000 106 898

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

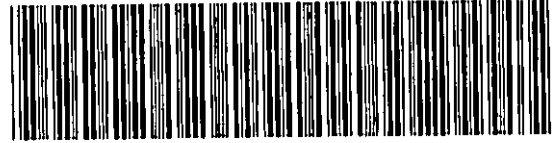
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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2019 JAN 22 AM 9:44
TALAMAS STATE UNIVERSITY

FILED

n BRUCE
JAN 28 2019

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: DISSOLUTION OF LITEN'LIFE HEMP OIL CBD, 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:

Michelle DeMello
(Name of Person)

LITEN' LIFE, LLC
(Firm/Company)

12524 SE 93 COURT ROAD
(Address)

SUMMERFIELD, FL 34491
(City/State and Zip Code)

For further information concerning this matter, please call:

Michelle DeMello at (352) 307-2522
(Name of Person) (Area Code & Daytime Telephone Number)

SEE CHECK

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)

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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
LIFE N' LIFE Hemp Oil CBN, LLC

2. The Articles of Organization were filed on 6/2015/2016 and assigned
document number L15000106898

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

THE NAME OF LLC HAS BEEN CHANGED
THROUGH THE FILING OF DOCUMENTS
WITH THE DIVISION OF CORPORATIONS, FLORIDA
A FEE PAID FOR NAME CHG. CLOSE OLD LLC

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

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:

Michelle DeMello
Signature

MICHELLE DEMELLO
Printed Name

FILING FEE: \$25.00

2019 JAN 22 AM 9:54
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Notice of Limited Liability Company Dissolution

NOTE: This page is optional

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company: LIFE N' LISE HEAP OIL CO, LLC

Document number of Limited Liability Company is: L 15000 106898

Date of dissolution was: 2019, JAN. 16

Description of information that must be included in a written claim:

NAME CHANGED WITH DEPT OF CORPORATIONS. THIS LLC IS IN ACTIVE & WE HAVE BEEN ISSUED A NEW CORP. NAME & NUMBER THROUGH DEPT OF CORPORATIONS OF FLORIDA. PLEASE DISSOLVE

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

12524 SE 93 COURT RD
SUMMERFIELD, FL 34491

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2019 JAN 22 AM 9:44
TALLAHASSEE, FLORIDA

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

Michelle DeMello
Printed Name of the Person Filing

Michelle DeMello
Signature of the Person Filing