

L08000054605

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

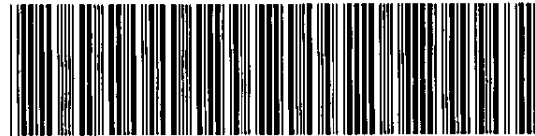
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

14 DEC 19 PM 4:40

RECEIVED
DEPARTMENT OF STATE

14 DEC 19 PM 4:29

T. Bureau DEC 22 2014

ACCOUNT NO. : I20000000195

REFERENCE : 427740 7906063

AUTHORIZATION :

COST LIMIT :

[Signature]
\$25.00

ORDER DATE : December 18, 2014

ORDER TIME : 3:01 PM

ORDER NO. : 427740-020

CUSTOMER NO: 7906063

DOMESTIC FILINGS

NAME: SYNERGY OF PENSACOLA, LLC

XX ARTICLES OF DISSOLUTION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams - EXT# 62935

EXAMINER'S INITIALS: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Synergy of Pensacola, 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:

Kimberly Jacoby

(Name of Person)

Synergy Solutions, Inc.

(Firm/Company)

7201 E Camelback Rd

(Address)

Scottsdale, AZ 85251

(City/State and Zip Code)

For further information concerning this matter, please call:

Lori Fentem

(Name of Person)

at

(602) 296-1641

(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
Synergy of Pensacola, LLC

2. The Articles of Organization were filed on 06/02/2008 and assigned
document number L08000054605

3. The delayed effective date the dissolution if not effective on the date of filing: Upon filing
(effective date cannot be prior to or more than 90 days later than date document is received for 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).

business downturn

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

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

Lori Fentem

Printed Name

FILING FEE: \$25.00

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TALLAHASSEE, FLORIDA