

LO90007BS417

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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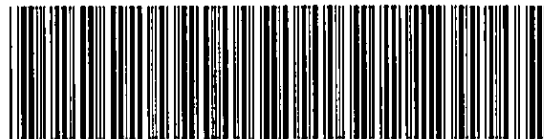
(Business Entity Name)

(Document Number)

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

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07/02/18 10:39 AM  
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7/23/18 DS



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 3, 2018

ERIC S HAUG LAW & CONSULTING, P.A.  
PO BOX 12031  
TALLAHASSEE, FL 32317

SUBJECT: THE PRACTICE OF STILLNESS, LLC  
Ref. Number: L09000075547

We have received your document for THE PRACTICE OF STILLNESS, LLC and your check(s) totaling \$50.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please write mailing address where claims can be sent.

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) 245-6051.

Dionne M Scott  
Regulatory Specialist II

Letter Number: 318A00013767

RECEIVED

2018 JUL 19 PM 12:01

CLERK OF COURT  
TALLAHASSEE, FL

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

1. The name of a limited liability company is

The Practice of Stillness, LLC

2. The Articles of Organization were filed on August 5, 2009 and assigned

document number L09000075547

3. The delayed effective date the dissolution if not effective on the date of filing: July 20, 2018

(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 consent of all the Members to dissolve the business.

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:

Amrita Brummel-Smith  
Signature

Amrita Brummel-Smith

Printed Name

**FILING FEE: \$25.00**

## 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: The Practice of Stillness, LLC

Document number of Limited Liability Company is: L09000075547

Date of dissolution was: July 20, 2018

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

The amount of the claim; the legal name of the entity asserting the claim; a brief description  
of the agreement or other circumstances under which the claim arose; and any other  
information to verify the nature and amount of the claim.

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

Eric S. Haug Law & Consulting, P.A.

P.O. Box 12031

Tallahassee, FL 32317-2031

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.

Amrita Brummel-Smith

Printed Name of the Person Filing

Amrita Brummel-Smith  
Signature of the Person Filing

**Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00**