

LB9 060078081

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

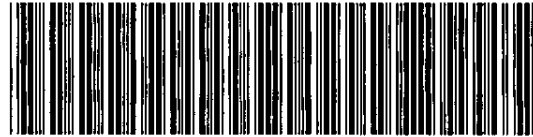
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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01/24/14--01020--014 **25.00

JAN 29 2014

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FILED
2014 JAN 24 PM 2:54
ST. MARY'S COURT
MILWAUKEE, WI 53204

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Essential Wellness for Life, 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:

Christina Franco

(Name of Person)

(Firm/Company)

1440 Wetherington Way

(Address)

Palm Harbor, FL 34683

(City/State and Zip Code)

For further information concerning this matter, please call:

Christina Franco

(Name of Person)

at (727) 507-7100

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

\$25.00 Filing Fee and Certificate of Dissolution

Florida Department of State

\$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

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SEC. OF STATE

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

1. The name of a limited liability company is
Essential Wellness for Life, LLC
2. The Articles of Organization were filed on 10/09/2009 and assigned
document number L09000078081
3. The delayed effective date the dissolution if not effective on the date of 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).
Closed down 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:

Signature

Printed Name

X Christina A. Franco

Christina Franco

FILING FEE: \$25.00

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2014 JAN 24 PM 2:54
CLERK OF COURT
JAN 24 2014