

L090000109229

(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:

A. LUNT

MAY 12 2010

EXAMINER

Office Use Only



300198731883

03/21/11--01039--024 **25.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2011 MAY 11 PM 4:02

FILED



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 4, 2011

ROBERT D DIETER
3312 GATOR BAY CREEK BLVD.
ST. CLOUD, FL 34772

SUBJECT: HEALTHY LIVING TECHNOLOGIES LLC
Ref. Number: L09000109229

We have received your document for HEALTHY LIVING TECHNOLOGIES LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

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) 245-6094.

Agnes Lunt
Regulatory Specialist II

Letter Number: 211A00005386



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 6, 2011

ROBERT D DIETER
3312 GATOR BAY CREEK BLVD.
ST. CLOUD, FL 34772

SUBJECT: HEALTHY LIVING TECHNOLOGIES LLC
Ref. Number: L09000109229

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

You failed to make the correction(s) requested in our previous letter.

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) 245-6094.

Agnes Lunt
Regulatory Specialist II

Letter Number: 811A00008400

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: HEALTHY LIVING TECHNOLOGIES, 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:

ROBERT DIETER
(Name of Person)
HEALTHY LIVING TECHNOLOGIES, LLC
(Firm/Company)
3312 GATOR BAY CREEK BLVD
(Address)
ST CLOUD, FL 34772
(City/State and Zip Code)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2011 MAY 11 PM 4:02

FILED

For further information concerning this matter, please call:

ROBERT D. DIETER at (407) 891-8557
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

1
ALREADY PAID

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
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

LARRY W STOLTZFUS, CPA

SAINT CLOUD, FLORIDA 34772

CELL: 407-873-6591

OFFICE: 407-892-9671

larryscpa@yahoo.com

ROBERT DIETER
HEALTHY LIVING TECHNOLOGIES LLC
3312 GATOR BAY CREEK BLVD
SAINT CLOUD, FL 34772

Dear Mr Dieter:

FLORDIA ARTICLES OF DISSOLUTION

COVER LETTER

INSERT PHONE NUMBER

ENCLOSE CHECK FOR \$ 35.00 PAYABLE TO

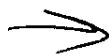
FLORIDA DEPARTMENT OF STATE

ARTICLES OF DISSOLUTION

SIGN

LAST 2 PAGES ARE LEFT BLANK

MAIL TO



FLORIDA DEPARTMENT OF STATE
AMENDMENT SECTION
DIVISION OF CORPORATIONS
P O BOX 6327
TALLAHASSEE, FL 32314

THIS WILL DISSOLVE YOUR CORPORATION IN FLORIDA

FILED
2011 MAY 11 PM 4:02
TALLAHASSEE, FLORIDA

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is

HEALTHY LIVING TECHNOLOGIES, LLC

2. The Articles of Organization were filed on 11-12-2009 and assigned document number

L09000109229

3. The date the dissolution was approved: 12-31-2010

4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 608.441, Florida Statutes, (copy 608.441 on back cover letter).

REQUEST BY SOLE MEMBER OF COMPANY - ROBERT DIETER

5. CHECK ONE:

- ☒ All debts, obligations and liabilities of the limited liability company have been paid or discharged.
-OR-
☐ Adequate provision has been made for the debts, obligations and liabilities pursuant to s. 608.4421.

6. All remaining property and assets have been distributed among its members in accordance with their respective rights and interests.

7. CHECK ONE:

- ☒ There are no suits pending against the company in any court.
-OR-
☐ Adequate provision has been made for the satisfaction of any judgment, order or decree which may be entered against it in any pending suit.

Signatures of the members having the same percentage of membership interests necessary to approve the dissolution:

Signature

Printed Name

Robert Dieter

ROBERT D. DIETER