

L11 0000039635

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

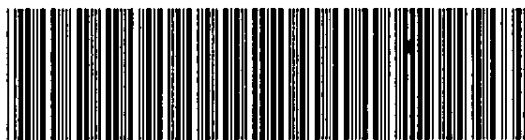
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02/20/12--01013--009 **25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 FEB 20 AM 9:39

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Olivia's Kid-Fit 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:

Olivia Johnson
(Name of Person)
Olivia's Kid-Fit LLC
(Firm/Company)
108 Valrico Station Rd Apt 7
(Address)
Valrico, FL 33594
(City/State and Zip Code)

For further information concerning this matter, please call:

Olivia Johnson at (813) 523 0071
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$25.00 Filing Fee ☐ 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

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DIVISION OF CORPORATIONS
12 FEB 20 AM 9:39

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

FILED - STATE
SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
12 FEB 20 11 AM 9:39

1. The name of a limited liability company is

Olivia's Kid-Fit LLC

2. The Articles of Organization were filed on

4/4/11

and assigned document number

L11 000039635

3. The date the dissolution was approved:

12/30/11

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).

Olivia's Kid-Fit LLC dissolved because of lack of
ability to market business.

Owner required to return to work full time

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

Olivia Johnson

Printed Name

Olivia Johnson