

41000124758

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APR 01 2015  
S. YOUNG

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Gisela's Holistic Fitness, 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:

Glenn Morgan  
(Name of Person)

Gisela's Holistic Fitness  
(Firm/Company)

5717 Floral Ave, ~~222~~  
(Address)

Jacksonville, FL 32211  
(City/State and Zip Code)

For further information concerning this matter, please call:

Glenn Morgan at (904) 535-0456  
(Name of Person) (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

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15 MAR 13 PM 5:35  
TALLAHASSEE, FL  
SECRETARY OF STATE

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

1. The name of a limited liability company is

Gisela's Holistic Fitness LLC

2. The Articles of Organization were filed on 11/2/2011 and assigned

document number L11000124758

3. The delayed effective date the dissolution if not effective on the date of 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).

No longer in business

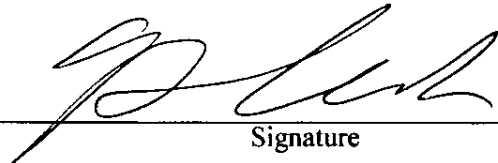
5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:

Glenn Morgan

5717 Floral Ave.

Jacksonville, FL 32211

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

Glenn Morgan  
Printed Name

**FILING FEE: \$25.00**

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MAR 13 PM 5:26  
CLERK OF DISTRICT COURT  
JACKSONVILLE, FLORIDA