L12000050398

| (Requestor's Name) |
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| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
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| (Business Entity Name) |
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| (Document Number) |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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Office Use Only



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COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT: Figure Eight Counseling and Consulting Group, 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:

Marcus A. Davis

(Name of Person)

Figure Eight Counseling and Consulting Group, LLC

(Firm/Company)

1703 NW 192nd Street

(Address)

Miami, FL 33056

(City/State and Zip Code)

For further information concerning this matter, please call:

Marcus A. Davis

954

557-5943

(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

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

| The name of a limited liability company is Figure Eight Counseling and Counseling Group, LLC | | |
|--|--|--|
| 2. The Articles of Organization were filed on April 13, 2012 and assigned document number L12000050398 | | |
| 3. The delayed effective date the dissolution if not effective on the date of filing: November 1, 2012 | | |
| 605.0707, Florida Statutes, | e that resulted in the limited liability company's dissolution pursuant to section (copy 605.0707 on back cover letter). ed to working with the company during the start up phase | |
| accepted a new position out of state and mutually decided that the company would | | |
| be dissolved. | | |
| 5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs: Marcus A. Davis | | |
| | 1703 NW 192nd Street | |
| | Miami, FL 33056 | |
| | | |
| 6. Signature of an authorized above to wind up the company | person or if there are no members, the signature of the person appointed and listed 's activities and affairs: | |
| Signature | Printed Name | |
| April & | Marcus A. Davis | |
| | FILING FEE: \$25.00 | |