

L12000068919

(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:

Office Use Only



800273596888

06/05/15--01021--004 **25.00

FILED
2015 JUN -5 PM 4:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. Ouligan JUN - 8 2015

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Vixen Fitness of Orlando, 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:

Denise Bautista

(Name of Person)

Vixen Fitness of Orlando LLC

(Firm/Company)

6689 Merryvale Lane

(Address)

Port Orange FL 32128

(City/State and Zip Code)

For further information concerning this matter, please call:

Denise Bautista

(Name of Person)

at (386) 566-2600

(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

FILED
2015 JUN -5 PM 4:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is

Vixen Fitness of Orlando, LLC

2. The Articles of Organization were filed on 05/22/2012 and assigned

document number L12000068919

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)

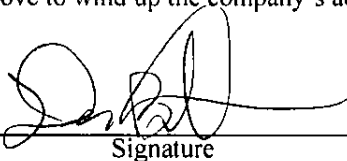
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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).

Sold business assets and discontinued operations as of April 30, 2015.

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

Denise Bautista

Printed Name

FILING FEE: \$25.00