

L12000078545

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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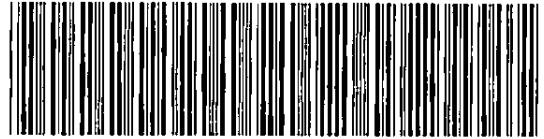
(Business Entity Name)

(Document Number)

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2024 APR 23 AM 9:43 2024 APR 23 PM 12:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AB



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TALLAHASSEE, FL 32301
P: 866.625.0838
F: 866.625.0839
COGENCYGLOBAL.COM

Date: 04/22/2024

Name: Xavian Brown

Reference #: 2265076

Entity Name: SUNSHINE FITNESS FORT WALTON BEACH, LLC

Account#: 120000000088

For any issues please contact

Xavian Brown

518-213-0739

☐ Articles of Incorporation/Authorization to Transact Business

☐ Amendment

☐ Change of Agent

☐ Reinstatement

☐ Conversion

☐ Merger

☒ Dissolution/Withdrawal

☐ Fictitious Name

☐ Other _____

Authorized Amount: \$25

Signature: XPM

① CORPORATE HQ
COGENCY GLOBAL INC.
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**ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY**

FILED

1. The name of a limited liability company is

SUNSHINE FITNESS FORT WALTON BEACH, LLC

2024 APR 23 AM 9:50

2. The Articles of Organization were filed on 6/13/2012

SECTION 605.0707, FLORIDA STATUTES
and assigned: STATE
FILED: 2024 APR 23, FL

document number L12000078545

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).

LLC is no longer conducting business in the state

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:

/s/ Justin Vartanian

Signature

Justin Vartanian

Printed Name

FILING FEE: \$25.00