L12000086717

(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



700267253447

12/17/14--01015--012 **25.00

TALL AHASSEF, FLORIO



COVER LETTER 🕟 🗖 🖟

	Divi	sion of Corporations			
SUBJE	CT:	Coach For Life Academy, LLC :			
		(ivaine of Limit	за спавниу Соптра	uiy <i>)</i>	
The enc	losed	Articles of Dissolution and fee(s) are submitt	ed for filing.		
Please n	eturn	all correspondence concerning this matter to	the following:		
		Marcia Collins			
	(Name of Person)				
	Coach For Life Academy, LLC				
(Firm/Company)					
	525 Emory Oak Street				
		(Address)		
		Ocoee, FL 34761			
		(City/Sta	te and Zip Code)		
For furtl	her in	formation concerning this matter, please call:			
	Ma	arcia Collins	407	614-4707	
		(Name of Person)		ode & Daytime Telephone Number)	
Enclosed	l is a c	check for the following amount:			
1	\$25.	00 Filing Fee and Certificate of Dissolution		ng Fee, Certificate of Dissolution &	

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

1.	The name of a limited liability company is				
	Coach For Life Academy, LLC				
2. '	The Articles of Organization were filed on June 29, 2012 and assigned				
,	document number <u>L12000086313</u>				
3.	The delayed effective date the dissolution if not effective on the date of filing: December 31, 2014 (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 505.0707, Florida Statutes, (copy 605.0707 on back cover letter).				
	Stopped doing 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:				
	No. 1				
5. list	Signature of an authorized person or if there are no members, the signature of the person appointed and ed above to wind up the company's activities and affairs:				
	Marcia Collins Marcia Collins				
	Signature Printed Name				
	FILING FEE: \$25.00				