

L120000127602

(Requestor's Name)

(Address)

(Address)

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Certified Copies _____ Certificates of Status _____

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A. LUNT

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TALLAHASSEE, FLORIDA

04/30/14--01003--025 **25.00

RECEIVED
14 APR 30 PM 1:02
DIVISION OF CORPORATIONS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Family Financial 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:

Jesse Edward Fristoe
(Name of Person)

Family Financial Fitness
(Firm/Company)

5145 Grandview Ct.
(Address)

Tallahassee, FL 32303
(City/State and Zip Code)

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For further information concerning this matter, please call:

Jesse Edward Fristoe at (850) 597 3243
(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**

1. The name of a limited liability company is

Family Financial Fitness

2. The Articles of Organization were filed on 10/05/2012 and assigned

document number 42000127602

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).

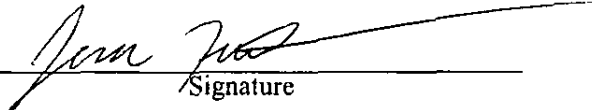
The partners are unable to ~~aff~~ be involved
in a 2nd employment

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

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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

Jesse Cristoe
Printed Name

FILING FEE: \$25.00