# L13000001670

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	Idress)	
(Cit	ty/State/Zip/Phone	<del>=</del> #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
	_	
Special Instructions to	Filing Officer:	·

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JUL 2 2 2014

T. BROWN

### **COVER LETTER**

TO: Registration Section Division of Corporations			
SUBJECT:	Gainesville	Nutrition	Consulting, LC
	(Name of Lim	ited Liability Compa	any)
The enclosed Articles of Dissolution	on and fee(s) are submi	itted for filing.	
Please return all correspondence co	oncerning this matter to	the following:	
	Meena Sho	ankar	
	(Na	ankar ume of Person)	
	Gainesville	Nutrition (	Consulting, LLC
	4241 NI	u 37th Ter.	•
		(Address)	
	Gainesville	1. FZ 326	05
	(City/St	ate and Zip Code)	
For further information concerning	this matter, please call	l:	
Meena Shi	ankar	at ( 352	ode & Daytime Telephone Number)
(Name of	Person)	(Area Co	ode & Daytime Telephone Number)
Enclosed is a check for the following a			
\$25.00 Filing Fee and Certifi	cate of Dissolution		ng Fee, Certificate of Dissolution & 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

·	ARTICLES OF DISSOLUTION
	ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY  illity company is Ville Nutrition Consulting, LLC
The name of a limited liab	ility company is
Gaines	ville Nutrition Consulting, LLC
The Articles of Organizati	on were filed on 1 15 13 and assigned
document number	13000007670
The delayed effective date (effective	the dissolution if not effective on the date of filing: te date cannot be prior to or more than 90 days later than date document is received for filing)
A description of occurrence 605.0707, Florida Statutes,	e that resulted in the limited liability company's dissolution pursuant to secti (copy 605.0707 on back cover letter).
No c	activity
	,
If the second was a second as a second	
	the name and address of the person appointed to wind up the company's $\Lambda \Lambda$ .
activities and affairs:	Meena Shankar
	4241 NW 37th Ter.
	Gainesville, Fr 32605
Signature of an authorized sted above to wind up the co	person or if there are no members, the signature of the person appointed and mpany's activities and affairs:
Meene Shon ko	- Meena Shankar
Signature	Printed Name

FILING FEE: \$25.00