

L17 0000 446FO

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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FILED  
16 MAY 21 PM 12:14  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

48 MAY 29 2014

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** One Leg Up 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:

John Freie

(Name of Person)

One Leg Up LLC

(Firm/Company)

7909 Broadmoor Pines Blvd

(Address)

Sarasota, FL 34243

(City/State and Zip Code)

For further information concerning this matter, please call:

John Freie

(Name of Person)

941

359-6860

at ( )

(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:**

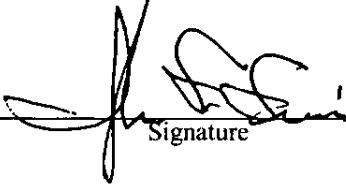
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**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  
One Leg Up LLC
2. The Articles of Organization were filed on March 25, 2013 and assigned  
document number L13000044680
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).  
Failure to make a profit.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
5. If there are no members, enter the name and address of the person appointed to wind up the company's  
activities and affairs: John Freie  
7909 Broadmoor Pines Blvd  
Sarasota, FL 34243  
\_\_\_\_\_
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

John Freie

Printed Name

**FILING FEE: \$25.00**

FILED  
14 MAY 21 PM 12:50  
TALLAHASSEE, FLORIDA