# L130000070894

(Re	questor's Name)				
(Address)					
(Address)					
(Cit	ty/State/Zip/Phon	e #)			
PICK-UP	☐ WAIT	MAIL			
(Bu	ısiness Entity Naı	me)			
(Document Number)					
Certified Copies	_ Certificate	s of Status			
Special Instructions to Filing Officer:					

Office Use Only



600273053296

05/22/15--01003--010 \*\*25.00

15 HAY 22 PH 1:58
SECRETARY OF STATE

WAY 2 6 2015

T. HAMPTON

#### **COVER LETTER**

TO:

Registration Section Division of Corporations

# DO FITNESS LLC (L13000070894)

(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:

## LAURA LEE ALSUP

(Name of Person)

(Firm/Company)

200 2ND AVE S #487

ST PETERSBURG, FL 33701

(City/State and Zip Code)

For further information concerning this matter, please call:

### LAURA LEE ALSUP

 $\frac{703}{at}$  850-4010

(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  DO FITNESS LLC					
2.	The Articles of Organization	were filed on	MAY 14, 2013	and assigned		
	document number L1300007	0894	<del></del>			
3.	Note: If the date inserted in the	the dissolution if not effective on the date of filing: DECEMBER 31, 2013 we date cannot be prior to or more than 90 days later than date document is received for filing) in this block does not meet the applicable statutory filing requirements, this date will not be ective date on the Department of State's records.				
4.	A description of occurrence 605.0707, Florida Statutes, (o	copy 605.0707 or	n back cover letter).	's dissolution pursuant to section BER 31, 2013 DUE TO		
	LACK OF BUSINESS, THUS	ZERO CASH FLO	DW.			
5.	If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:  SOLE MEMBER REMAINS LAURA LEE ALSUP					
		PLEASE NOTE	THE ADDRESS CURRENTLY	Y ON FILE IS INCORRECT		
		NEW ADDRESS	S. 200 2ND AVE S #487 ST I	PETERSBURG, FL 33701		
6. lis	Signature of an authorized poted above to wind up the con	erson or if there appany's activities	are no members, the signature and affairs:	re of the person appointed and		
		LAURA LEE AL				
	Signature			nted Name		
		– Èll	JING FEE: \$25.00			