

L1300141324

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

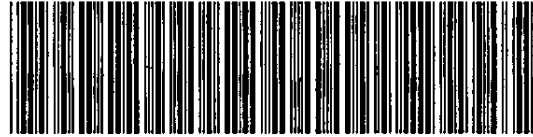
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100312033661

04/20/18--01013--019 **25.00

2018 APR 20 P 2:41
CLERK OF COURT
TALLAHASSEE, FLORIDA

FILED

4/23/18 DS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Coach For Life, LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Statement of Termination and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Peter J Reding

Name of Person

Coach For Life, LLC

Firm/Company

8815 Conroy-Windermere Road #157

Address

Orlando, FL 32835

City/State and Zip Code

pjr@icme.us

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Peter J Reding

Name of Person

at (407) 614-4707

Area Code Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

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

2018 APR 20 2:41
TALLAHASSEE, FLORIDA

FILED

STATEMENT OF TERMINATION

Pursuant to section 605.0709(7), Florida Statutes, I hereby submit the following Statement of Termination:

FIRST: The name of the limited liability company is: Coach For Life, LLC

SECOND: The Florida Document number of the limited liability company is: L13000141324

THIRD: The date of filing of the initial articles of organization is: 1/1/2014

FOURTH: The date of filing of the dissolution is: 12/31/2017

FIFTH: This limited liability company has completed winding up its activities and affairs and has determined that it will file a statement of termination.


Signature of Authorized Representative

Peter J Reding

Typed or printed name of signature

OFFICE OF STATE
TALLAHASSEE, FLORIDA

2018 APR 20 P 2:41

FILED

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)

FILED
Dec 28, 2017
Secretary of State

ARTICLES OF DISSOLUTION

Pursuant to section 605.0707, Florida Statutes, this Florida limited liability company submits the following Articles of Dissolution:

The name of the limited liability company as currently filed with the Florida Department of State:

COACH FOR LIFE LLC

The document number of the limited liability company: L13000141324

The file date of the articles of organization: October 4, 2013

The effective date of the dissolution if not effective on the date of filing: December 31, 2017

A description of occurrence that resulted in the limited liability company's dissolution:

WRITTEN CONSENT OF ALL LLC MEMBERS

The name and address of the person appointed to wind up the company's activities and affairs:

PETER J REDING
525 EMORY OAK STREET
OCOE, FL 34761

I/we submit this document and affirm that the facts stated herein are true. I/we am/are aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in section 817.155, Florida Statutes.

Signature: PETER J REDING

Electronic Signature of authorized person

FILED
2018 MAR 20 P 2:41
CLERK OF STATE
TALLAHASSEE, FL 32304