# 113000169334

| (Re                     | equestor's Name)   |             |
|-------------------------|--------------------|-------------|
| (Ad                     | dress)             |             |
| (Ad                     | ldress)            |             |
| (Cit                    | ry/State/Zip/Phone | e #)        |
| PICK-UP                 | ☐ WAIT             | MAIL        |
| (Bu                     | siness Entity Nar  | me)         |
| (Do                     | cument Number)     |             |
| Certified Copies        | _ Certificates     | s of Status |
| Special Instructions to | Filing Officer:    |             |
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Office Use Only



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S. WARREN MAR 2 2 2018

#### **COVER LETTER**

| TO: Registration Section   |
|--|
| Division of Corporations   |
| SUBJECT: Life Health: Wellness   |
| Name of Limited Liability Company  |
| The analoged Statement of Raycontion of Dissolution for Florida Limited Lightlity Company and frace) are                       |
| The enclosed Statement of Revocation of Dissolution for Florida Limited Liability Company and fee(s) are submitted for filing. |
| woulded to mile.   |
| Please return all correspondence concerning this matter to:  |
| No solo II solo  |
| Havenaa Inorntari  |
| Contact Person   |
| Delegio Wing Correllaio  |
| hobens Juice; Stratiles of   |
| 3100 May Drive St-300 9519 Starhawk Dr. Address  |
| 2199 mmn Day Ct 200 4519 5101 10101 Di   |
| Address Address  |
| Addiess  |
| 72 1/2 hasse FI 20208  |
| City, State and Zip Code   |
| On the day of the second court   |
| aguendathorntenahotmail.com  |
| E-hail address: (to be used for future annual report notification)   |
| For further information concerning this matter, please call:   |
| Movemba Trymton 21,850, 273-1519   |
| Name of Contact Person Area Code Daytime Telephone Number  |

#### STREET 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, Fl. 32314

# STATEMENT OF REVOCATION OF DISSOLUTION FOR FLORIDA LIMITED LIABILITY COMPANY

Pursuant to section 605.0708, Florida Statutes, this Florida limited liability company revokes its articles of dissolution prior to the expiration of 120 days following the effective date (or file date, if no effective date) of the articles of dissolution.

| 1. | The name of the company is: Life health? Wellness uc                   |
|----|--|
| 2. | The document number of the company is                                  |
|    |  |
| 3. | The effective date the Dissolution was filed is 21318                  |
|    |  |
| 4. | The revocation of dissolution was authorized on 31316 3 3018           |
|    |  |
| 5. | A copy of the Articles of Dissolution is attached.                     |
|    | lan Merter   |
|    | Signature of person authorized to submit the revocation of dissolution |
|    |  |

Filing Fee: \$100.00 Certified Copy: \$30.00 (optional)

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FILED

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SECRETARY OF STATE
TALLAHASSEE. FLORIDA

#### FILED Feb 13, 2018 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:

LIFE HEALTH AND WELLNESS LLC

The document number of the limited liability company: L13000169334

The file date of the articles of organization: December 6, 2013

The effective date of the dissolution if not effective on the date of filing: February 14, 2018

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

NO LONGER IN BUSINESS/THE BUSINESS IS CLOSED

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

AQUENDA THORNTON 343 SUMMER GARDEN DR MARIETTA, GA 30064 UN

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: AQUENDA THORNTON

Electronic Signature of authorized person