

L140000 23387

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

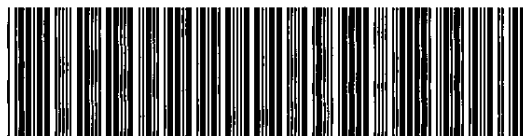
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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16 JAN -4 AM 9:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JAN 06 2016

J SHIVERS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TriggerPoint Yoga 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:

JoAnne Schaub

(Name of Person)

(Firm/Company)

111Q Ribbon Lane

(Address)

Cary NC 27518

(City/State and Zip Code)

For further information concerning this matter, please call:

JoAnne Schaub

(Name of Person)

919 896-1770

(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

TriggerPoint Yoga LLC

2. The Articles of Organization were filed on 12/20/2014 and assigned

document number L14000023387

3. The delayed effective date the dissolution if not effective on the date of filing: n/a
(effective date cannot be prior to or more than 90 days later than date document is received for filing)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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).

All members consent to closing LLC.

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:

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:

JoAnne Schaub
Signature

JoAnne Schaub

Printed Name

FILING FEE: \$25.00

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TALLAHASSEE, FLORIDA

Notice of Limited Liability Company Dissolution

NOTE: This page is optional

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company: TriggerPoint Yoga LLC

Document number of Limited Liability Company is: L140000023387

Date of dissolution was: 12/28/2015

Description of information that must be included in a written claim:

All members consent to closing LLC.

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

JoAnne Schaub
111Q Ribbon Lane
Cary NC 27518

A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

JoAnne Schaub

Printed Name of the Person Filing

JoAnne Schaub
Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00

16 JAN -4 AM 9:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED