

# L14000024153

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

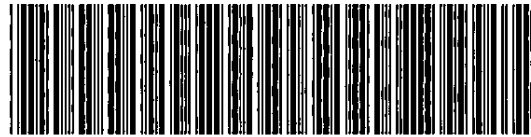
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



500297828725

04/21/17--01015--011 \*\*55.00

APR 24 2017  
S. YOUNG

FILED STATE  
SECRETARY OF FLORIDA  
TALLAHASSEE, FLORIDA  
17 APR 21 PM 12:58

**COVER LETTER**

TO: Registration Section  
Division of Corporations

SUBJECT: Demand Fitness, 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:

Lawrence Lambert, Esq.

(Name of Person)

Law Office of Lawrence B. Lambert

(Firm/Company)

9100 S. Dadeland Blvd., Suite 400

(Address)

Miami, FL 33156

(City/State and Zip Code)

For further information concerning this matter, please call:

Lawrence Lambert

(Name of Person)

at ( 305 ) 459-3033

(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

FILED  
STATE  
SECRETARY OF  
TALLAHASSEE, FLORIDA  
17 APR 21 PM 12:58

**ARTICLES OF DISSOLUTION  
FOR  
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is

Demand Fitness, LLC

2. The Articles of Organization were filed on February 12, 2014 and assigned

document number L14000024153

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)

**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).

Voluntary dissolution pursuant to the Members unanimous consent.

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:



Signature

Member and Manager

Printed Name

Adam Robbins

**FILING FEE: \$25.00**

FILED STATE  
SECRETARY OF FLORIDA  
TALLAHASSEE, FLORIDA  
17 APR 21 PM 12:58

## 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: Demand Fitness, LLC

Document number of Limited Liability Company is: L14000024153

Date of dissolution was: February 28, 2017

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

Name of the creditor.

The date on which the claim arose and amount of the claim.

A written invoice or statement describing the goods or services provided to the Company for which payment is sought.

A statement of the factual basis for the claim if other than for good or services provided to the Company.

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

Law Office of Lawrence B. Lambert

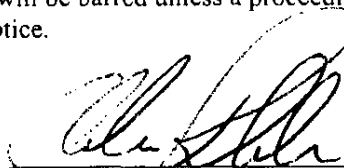
9100 S. Dadeland Blvd., Suite 400

Miami, FL 33156

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.

Adam Robbins

Printed Name of the Person Filing



Signature of the Person Filing

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

FILED  
STATE  
SECRETARY OF  
FLORIDA  
TALLAHASSEE  
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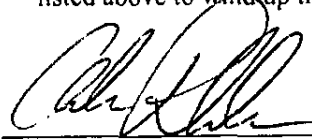
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\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

Member and Manager



Printed Name

**FILING FEE: \$25.00**

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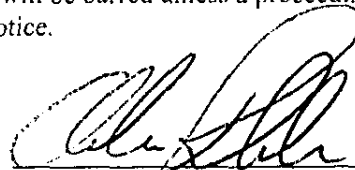
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Adam Robbins

Printed Name of the Person Filing



Signature of the Person Filing

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