L14000048624

	Requestor's Name)
	Address)
(/	Address)
·	City/State/Zip/Phone #)
. PICK-UP	WAIT MAIL
- (E	Business Entity Name)
7)	Document Number)
Certified Copies	Certificates of Status
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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Disolve Tropic PACE Fitness 11
(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:
POBET E MAC Inty RE (Name of Person)
(Firm/Company) 3504 SE 22nd Auce
3504 SE 22nd Are (Address) Cape Coral FL 33904 (City/State and Zip Code)
For further information concerning this matter, please call:
ROBERT E MACINTYRE 612 770 0219 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25,00 Filing Fee and Certificate of Dissolution \$255,00 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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liability company is 7170010 PACE FITTOSS 11 LESS
2.	The Articles of Organization were filed on $\frac{3}{24}\frac{20}{4}$ and assigned
	document number <u>L14000048624</u>
3.	The delayed effective date the dissolution if not effective on the date of filing: \[\frac{7}{20} \] \[\frac{20}{20} \] \[\frac{20}{20} \] \[\frac{80}{20} \] \[\
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).
	Business Sold 12/31/2020
5.	If there are no members, enter the name and address of the person appointed to wind up the company's
	activities and affairs: RERT E MACINTYRE
	3504 SE 22nd Aug
	Lope Ciral FL 33904
6. ab	Signature of an authorized person or if there are no members, the signature of the person appointed and listed ove to wind up the company's activities and affairs:
-/-	Robert Ellice Litere Robert E MACINTYI Signature Printed Name

FILING FEE: \$25.00

Barbara Machityre. Barbara MacIntyre