

114000122365

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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02/15/19--01021--023 **25.00

2019 FEB 15 PM 4:48
SECRETARY OF STATE
TALLAHASSEE, FL 0913

FEB 20 2019
C McNAIR

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **GLOBAL HEALTH EDUCATORS, LLC**
(Name of Limited Liability Company)

2019 FEB 15 PM 4:46
SECURITY
TALLAHASSEE, FL 32301

The enclosed Articles of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Stephen Loester

(Name of Person)

Gibson & Perkins, PC

(Firm/Company)

100 W. 6th Street, Suite 204

(Address)

Media, PA 19063

(City/State and Zip Code)

For further information concerning this matter, please call:

Stephen Loester

(Name of Person)

at (**610**) **565-1708**

(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**

2019 FEB 15 PM 4:48
RECEIVED
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is
GLOBAL HEALTH EDUCATORS, LLC

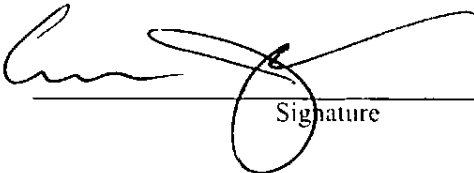
2. The Articles of Organization were filed on 12/01/2016 and assigned
document number L14000122365

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).
The limited liability company is dissolved with the consent of all the members.

5. If there are no members, enter the name and address of the person appointed to wind up the company's
activities and affairs: ERIC J. DEPERT
15238 Isabella Court, Corpus Christi, Texas 78418

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

ERIC J. DEPERT

Printed Name

FILING FEE: \$25.00