

L16000036672

(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:

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03/19/18--01007--027 **25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
18 MAR 19 PM 1:19

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MAR 19 2018

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Intuitive Training & Consulting, 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:

Candys A. Hess

(Name of Person)

Intuitive Training & Consulting, LLC

(Firm/Company)

2094 Avenida de Sol

(Address)

Navarre, FL 32566

(City/State and Zip Code)

For further information concerning this matter, please call:

Candys A. Hess

(Name of Person)

at (850) 855-3899

(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

Intuitive Training & Consulting, LLC

2. The Articles of Organization were filed on 01/14/2016 and assigned

document number L16000036672

3. The delayed effective date the dissolution if not effective on the date of filing: 01/01/2018
(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).

I went through a divorce and needed to seek regular full-time employment in order to support myself and my
children.

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

Candys A. Hess

2094 Avenida de Sol

Navarre, FL 32566

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:

Candys A. Hess
Signature

Candys A. Hess

Printed Name

FILING FEE: \$25.00

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
18 MAR 19 PM 1:10**

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: Intuitive Training & Consulting, LLC

Document number of Limited Liability Company is: L16000036672

Date of dissolution was: 01/01/2018

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

training & consulting services

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

Candys A. Hess

Intuitive Training & Consulting, LLC

2094 Avenida de Sol

Navarre, FL 32566

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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.

Candys A. Hess

Printed Name of the Person Filing

Candys A. Hess

Signature of the Person Filing