

L16000200207

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

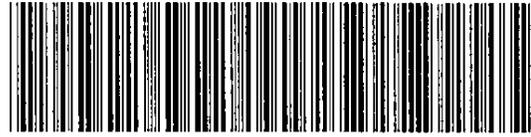
(Business Entity Name)

(Document Number)

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

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2017 JUN 19 PM 4:46  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

K SALY

JUN 20 2017

**COVER LETTER**

TO: Registration Section  
Division of Corporations

SUBJECT: APEX PROFIT CONSULTING, LLC  
(Name of Limited Liability Company)

The enclosed Articles of Dissolution and fees) are submitted for filing.

Please return all correspondence concerning this matter to the following:

MICHAEL R. WREGGITT  
(Name of Person)

APEX PROFIT CONSULTING, LLC  
(Firm/Company)

3539 APALACHE PKWY 3-112  
(Address)

TALLAHASSEE, FL 32311  
(City/State and Zip Code)

For further information concerning this matter, please call:

MIKE WREGGITT at ( 850 ) 376-0346  
(Name of Person) (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

FILED  
2017 JUN 19 PM 4:46

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is

APEX PROFIT CONSULTING, LLC

2. The Articles of Organization were filed on 28 Oct, 2016 and assigned

document number L16000200209

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).

Decided not to pursue this business.

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

Michael R. Wreggitt

236 De Soto #7

Tallahassee, FL 32303

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

Michael R. Wreggitt  
Printed Name

FILING FEE: \$25.00