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To:

Division of Corporations  
Fax Number : (850)617-6383

From:

*Anam Sanz*  
Account Name : AVILA RODRIGUEZ HERNANDEZ MENA & FERRI LLP  
Account Number : I20070000136  
Phone : (786)594-4102  
Fax Number : (786)664-3375

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LLC DISSOLUTION OR WITHDRAWAL  
WELLNIA LLC

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FAX AUDIT NO. H20000435721 3

ARTICLES OF DISSOLUTION  
FOR  
WELLNIA, LLC

Pursuant to Section 605.0707, Florida Statutes, the undersigned, being the Sole Member of Wellnia, LLC hereby adopts these Articles of Dissolution pursuant to the following terms and conditions:

1. The name of the limited liability company is Wellnia, LLC
2. The Articles of Organization were filed on November 2, 2016 and assigned document number L16000200906.
3. The delayed effective date the dissolution if not effective on the date of filing: N/A
4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to Section 605.0707, Florida Statutes:

Consent of the Sole Member to Dissolution

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

SOLE MEMBER:

Wellness BCN, S.L., a Spanish *sociedad limitada*

By: 

Name: JAIME FREIXAS PILANOL

Title: ADMINISTRADOR

FAX AUDIT NO. H20000435721 3

**Notice of Limited Liability Company Dissolution**

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: Wellula, LLC

Document number of Limited Liability Company is: L16000200906

Date of dissolution is: December 22, 2020

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

The claim must be in writing and must include (A) the name and address of the claimant; (B) the amount of the claim, (C) a detailed description of the nature of the claim; and (D) documentation reasonably supporting the claim.

Mailing address where claims can be sent:

1101 Brickell Avenue  
South Tower, 8<sup>th</sup> Floor  
Miami, FL 33131

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.

**SOLE MEMBER:**

Wellness BCN, S.L., a Spanish *sociedad limitada*

By: 

Name: JAIME FREIXAS PICARD

Title: ADMINISTRADOR