

116000201691

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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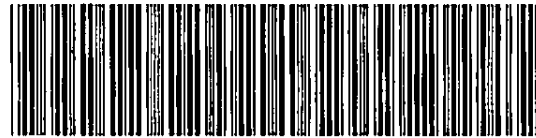
(Business Entity Name)

(Document Number)

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2017 SEP -5 PM 2:21  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

K SALY  
SEP -7 2017

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: ATHLETE'S TUNE-UP AND REPAIR, 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:

LISA BOUDREUX  
(Name of Person)

(Firm/Company)

805 N. OLIVE AVE #409  
(Address)

WEST PALM BEACH FL 33401  
(City/State and Zip Code)

For further information concerning this matter, please call:

LISA BOUDREUX at (504) 913 9466  
(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 SEP -5 PM 2:21

CLERK OF THE STATE  
ALLAHASSEE, FLORIDA

1. The name of a limited liability company is

ATHLETE'S TUNIC UP AND REPAIR LLC

2. The Articles of Organization were filed on Nov 2016 and assigned

document number L16000201691

3. The delayed effective date the dissolution if not effective on the date of filing: 9/20/17  
(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).

Owner is Pursuing Full-Time Employment

ELSCHWITZ

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

LISA BOVDIREUX

805 N. OLIVE AVE # 409

West Palm Beach FL 33401

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]

Signature

Lisa Boudireux

Printed Name

FILING FEE: \$25.00