

L17000000249

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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MAY 15 2013

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Global Impact Coaching, LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Statement of Termination and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Peter J Reding

Name of Person

Global Impact Coaching, LLC

Firm/Company

525 Emory Oak Street

Address

Ocoee, FL 34761

City/State and Zip Code

pjr@icme.us

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Peter J Reding

Name of Person

at (407) 614-4707

Area Code Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

## STATEMENT OF TERMINATION

Pursuant to section 605.0709(7), Florida Statutes, I hereby submit the following Statement of Termination:


**FIRST:** The name of the limited liability company is: Global Impact Coaching, LLC

**SECOND:** The Florida Document number of the limited liability company is: L17000000249

**THIRD:** The date of filing of the initial articles of organization is: 1/1/2017

**FOURTH:** The date of filing of the dissolution is: 3/31/2018

**FIFTH:** This limited liability company has completed winding up its activities and affairs and has determined that it will file a statement of termination.

  
Signature of Authorized Representative

Peter J Reding, Manager

Typed or printed name of signature

Filing Fee: \$25.00  
Certified Copy: \$30.00 (optional)

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