

L170000 70078

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

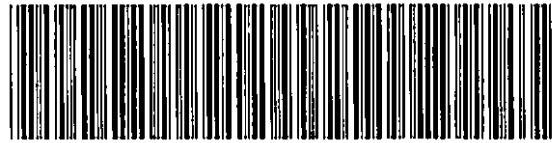
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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08/30/18--01023--023 **25.00

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SEP 21 2018



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 10, 2018

MIKAYLA JONES
2067 SW CRANBERRY ST.
PORT ST. LUCIE, FL 34953

SUBJECT: WHOLEHEARTED HEALTH LLC
Ref. Number: L17000070078

We have received your document for WHOLEHEARTED HEALTH LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce
Corporate Records Supervisor

Letter Number: 318A00018754

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Wholehearted Health, 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:

Mr. Kayla Jones
(Name of Person)

Recording agent
(Firm/Company)

2067 SW Crankcrist
(Address)

PSC FL 34953
(City/State and Zip Code)

For further information concerning this matter, please call:

Mikayla Jones at 772.312.1059
(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**

1. The name of a limited liability company is

Wholehearted Health, LLC

2. The Articles of Organization were filed on 3/28/17 and assigned

document number 617 0000 700 78

3. The delayed effective date the dissolution if not effective on the date of filing: 8/1/18
(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.

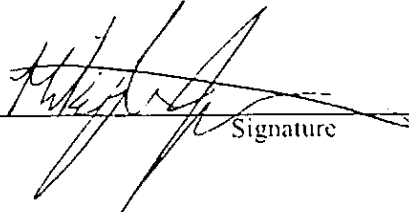
4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).

This LLC has not been able
to establish there affairs
and has made the decision
to terminate

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

Mikayla Jones
2267 SW Crumborg St
PSL FL 34953

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

Mikayla Jones
Printed Name

FILING FEE: \$25.00