L17000177886

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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(Do	ocument Number)	
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DIVISION OF CORPORATIONS

K. SALY JAN -5 2018

COVER LETTER

Registration Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

TO:

SURJECT: Genesis 101 UC		
SUBJECT: Genesis 101 UC (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:		
Sabeena Lyell (Name of Person)		
(Name of Person)		
(Firm/Company)		
229 NW 50th Ave (Address)		
(Address)		
Bell Florida 32619 (City/State and Zip Code)		
(Chyrstaic and Zip Code)		
For further information concerning this matter, please call:		
≤ 1 352 . 972 21.21		
Sabeera Lyell at (352) 872 2621 (Name of Person) (Area Code & Daytime Telephone Number)	_	
(man of tellow)		
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: STREET/COURIER ADDRESS:	:	
Registration Section Registration Section Division of Corporations Division of Corporations		
Division of Corporations Division of Corporations		

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY



i.	The name of a limited liability company is
	Genecis 101 110
2.	The Articles of Organization were filed on
	document number <u>[1700]77886</u>
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).
	Not profitable.
5.	If there are no members, enter the name and address of the person appointed to wind up the company's
	activities and affairs:
	229 NW Joth Ave
	Rail F1 32419
6 li	Signature of an authorized person or if there are no members, the signature of the person appointed and sted above to wind up the company's activities and affairs:
	Asignature Sabeena Lyell Printed Name
)
	FILING FEE: \$25.00