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(Red	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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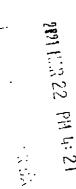
Office Use Only



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JUN 28 2021





COVER LETTER

	TO: Registration Section Division of Corporations				
SUBJEC	T: Organic Life, Inc.				
SOBSLE	(Name of Limit	ed Liability Company)			
The enclo	osed Articles of Dissolution and fee(s) are submit	ted for filing.			
Please ret	urn all correspondence concerning this matter to	the following:			
	James C. Paul				
	(Nan	ne of Person)			
	Organic Life, Inc.	n/Company)			
	(Fin	n/Company)			
	5701 Fort Denaud Road				
	(Address)			
	LaBelle, FL 33935				
	(City/Sta	te and Zip Code)			
For furthe	er information concerning this matter, please call:				
_	James C. Paul	at (<u>863-</u>) <u>675-4410</u>			
	(Name of Person)	(Area Code & Daytime Telephone Number)			
Enclosed is	s 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 Address:			
	Registration Section	Registration Section			
	Division of Corporations Division of Corporations				
	P.O. Box 6327	The Centre of Tallahassee			
•	lallahassee, FL 32314	2415 N. Monroe Street, Suite 810			
		Tallahassee, FL 32303			



This check was marked with the first rightst to dissolve the business.



Gulfcoast Nurseries, LLC P.O. Box 2357 LaBelle, FL 33975 863.675.4410 FIRST BANK OF CLEWISTON LABELLE, FL 33975 63-377/670 3655

_3/16/2021____

PAY TO THE ORDER OF _

MEMO

_Fla. Dept of State

\$ --25.00

Fla. Dept of State Registration Section Division of Corp. P O Box 6327 Tallahassee, FL 32314

2013 B695 0 0 6

Gulfcoast Nurseries, 1.1.C

3655

Fla. Dept of State

Date Type Reference 3/16/2021 Bill Organic Life

Original Amt. 25.00 Balance Due 25.00 3/16/2021 Discount

Payment 25.00

Check Amount

25.00

First Bank

L18000162795

25.00

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liabili Organic Life, Inc	· ·	
2. The Articles of Organization	were filed on <u>July 5, 2018</u> an	d assigned
document numberL180	00162795	
Note: If the date inserted in the	the dissolution if not effective on the date of filing:	annary 1, 2021 nent is received for filing) rements, this date will not be
A description of occurrence 605.0707, Florida Statutes, (c	that resulted in the limited liability company's dissolution opy 605.0707 on back cover letter).	ution pursuant to section
not feasible at t	his time to go into business	
,		
	er the name and address of the person appointed to wi	17. 20
i. If there are no members, enter	er the name and address of the person appointed to wi	nd up the company's
activities and affairs:	James C. Paul	
	5701 Fort Denaud Road	4: 2
	LaBelle, FL 33935	
 Signature of an authorized pobove to wind up the company? 	erson or if there are no members, the signature of the sactivities and affairs:	person appointed and liste
Dumes (u)	Iames_C. Paul	
Signature	Printed Na	ne
y .	FILING FEE: \$25.00	