

# L19000018228

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

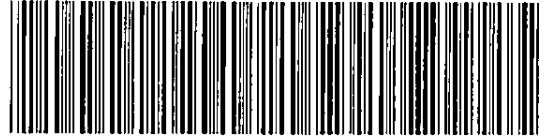
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



600425676716

FILED

2024 APR 23 AM 10:17

TALLAHASSEE, FLORIDA

RECEIVED

2024 APR 23 PM 12:44

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



115 N CALHOUN ST., STE. 4  
TALLAHASSEE, FL 32301  
P: 866.625.0838  
F: 866.625.0839  
COGENCYGLOBAL.COM

Date: 04/22/2024

Name: Xavian Brown

Reference #: 2265076

Entity Name: SUNSHINE FITNESS DAVENPORT, LLC

Account#: 120000000088  
For any issues please contact  
Xavian Brown  
518-213-0739

- ☐ Articles of Incorporation/Authorization to Transact Business
- ☐ Amendment
- ☐ Change of Agent
- ☐ Reinstatement
- ☐ Conversion
- ☐ Merger
- ☒ Dissolution/Withdrawal
- ☐ Fictitious Name
- ☐ Other \_\_\_\_\_

Authorized Amount: \$25

Signature: 

**ARTICLES OF DISSOLUTION  
FOR  
A LIMITED LIABILITY COMPANY**

**FILED**

1. The name of a limited liability company is

SUNSHINE FITNESS DAVENPORT, LLC

2024 APR 23 AM 10: 17

2. The Articles of Organization were filed on 1/22/2019

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

document number L19000018228

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).

LLC is no longer conducting business in the state

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

Justin Vartanian

4 LIBERTY LANE WEST HAMPTON, NH 03842 USA

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:

/s/ Justin Vartanian

Signature

Justin Vartanian

Printed Name

**FILING FEE: \$25.00**