

L2 0000058192

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

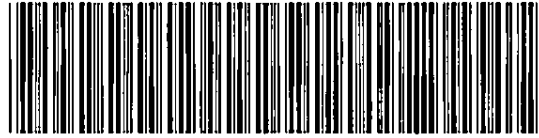
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200441407452

FILED

2024 DEC 27 AM 10:19

SECRETARY OF STATE
TALLAHASSEE, FL

2024 DEC 27 AM 11:15

SECRETARY OF STATE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: FORCE 2 VELOCITY STRENGTH & CONDITIONING, 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:

Garrett Phelps

(Name of Person)

FORCE 2 VELOCITY STRENGTH & CONDITIONING, LLC

(Firm/Company)

4405 N Thatcher

(Address)

Tampa, FL 33614

(City/State and Zip Code)

For further information concerning this matter, please call:

Garrett Phelps

(Name of Person)

765

at ()

2507733

(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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

2024 DEC 27 AM 10:19
FILED
STATE
TALLAHASSEE, FL

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

1. The name of a limited liability company is
FORCE 2 VELOCITY STRENGTH & CONDITIONING, LLC
2. The Articles of Organization were filed on 02/20/2020 and assigned
document number L20000058192
3. The delayed effective date the dissolution if not effective on the date of filing: 01/10/2025
(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).
I am no longer need this LLC because i am employed and not a subcontractor anymore.
I am no longer need this LLC because i am employed and not a subcontractor anymore.
I am no longer need this LLC because i am employed and not a subcontractor anymore.
5. If there are no members, enter the name and address of the person appointed to wind up ~~the~~ company's
activities and affairs:

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

Garrett Phelps

Printed Name

FILING FEE: \$25.00

FILED
024 DEC 27 AM 10:19
SECRETARY OF STATE
TALLAHASSEE, FL