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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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MAIL

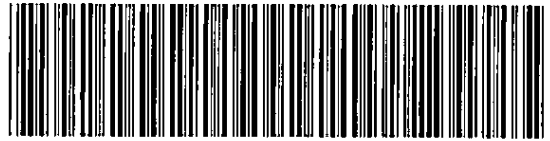
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2023 MAR 24 AM 9:08
CLERK OF STATE
TALLAHASSEE, FL



**MESTDAGH, WALL
& HAMILTON**

ATTORNEYS AND COUNSELORS AT LAW

ALEXANDRE M. MESTDAGH, ESQ.
STEVE. WALL, ESQ.
CHRISTOPHER M. HAMILTON, ESQ.
HELEN FORD, ESQ.
DOMINIC SIEBER, ESQ.
EDWARD J. FORE, ESQ.
MARK A. GRIMES, ESQ.

March 22, 2023

SENT VIA OVERNIGHT DELIVERY
TRACKING # 7716 4075 9492
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Huffman & Kern Ventures LLC
Articles of Dissolution

Dear Sir/Madam:

The following items are being submitted in order to dissolve the Florida Limited Liability Company known as Huffman & Kern Ventures LLC:

- Cover Letter with phone number and return address.
- Articles of Dissolution for Huffman & Kern Ventures LLC
- Notice of Limited Liability Company Dissolution.
- A check in the amount of \$25.00.
- A pre-addressed, stamped return envelope.

Please file the Articles and Notice, and return the letter of acknowledgement and certificate of dissolution to me using the return envelope provided.

If you have questions, please let us know. Thank you.

Sincerely,

Dominic Sieber

Dominic Sieber, Esq.

Encl.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: New Age Chiropractic, 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:

Dominic Sieber, Esq.

(Name of Person)

Mestdagh, Wall & Hamilton, P.A.

(Firm/Company)

280 W. Canton Avenue, Suite 110

(Address)

Winter Park, FL 32789

(City/State and Zip Code)

For further information concerning this matter, please call:

Dominic Sieber, Esq.

(Name of Person)

at (**407**) **702-6702**

(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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee

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

1. The name of a limited liability company is

New Age Chiropractic, LLC

2. The Articles of Organization were filed on **8/11/2020** and assigned

document number **L20000242486**

3. The delayed effective date the dissolution if not effective on the date of filing: **Upon 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).

The company is being voluntarily dissolved upon the consent of all members, pursuant to Florida Statutes, Section 605.0701(2). The company is now filing this Article of Dissolution in order to voluntarily dissolve and to wind up its affairs.

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

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SECRETARY OF STATE
TALLAHASSEE, FL

FILED

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:


Stephanie Kern (Mar 22, 2023 11:07 EDT)

Signature

Stephanie Kern

Printed Name

Notice of Limited Liability Company Dissolution

NOTE: This page is optional

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company: New Age Chiropractic, LLC

Document number of Limited Liability Company is: L20000242486

Date of dissolution was: Upon filing of Article of Dissolution

Description of information that must be included in a written claim:

The name, address, and telephone number of the Claimant

The nature of the claim

If based on a contract or written agreement, a copy of that written instrument

The value of the claim (if known).

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

Dominic Sieber, Esq.

Mestdagh, Wall & Hamilton, P.A.

280 W. Canton Ave., Suite 110

Winter Park, FL 32789

A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Stephanie Kern

Printed Name of the Person Filing



Stephanie Kern (Mar 22, 2023 17:02 EDT)

Signature of the Person Filing