

K21000469559

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

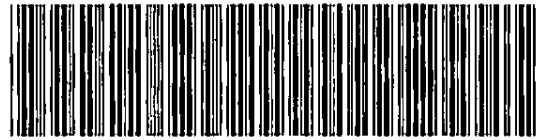
(Business Entity Name)

(Document Number)

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2022 MAR 23 AM 8:33

CLERK OF STATE  
TALLAHASSEE, FL

C. BRUMBLEY

APR 14 2022

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Work/Life Consulting  
\_\_\_\_\_  
(Name of Limited Liability Company)

2 RECEIVED  
2022 MAR 23 AM 10:59  
SECRETARY OF STATE  
TALLAHASSEE, FL

The enclosed Articles of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Cynthia Cole

\_\_\_\_\_  
(Name of Person)

\_\_\_\_\_  
(Firm/Company)

734 Berkley Drive

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

Pensacola/Florida 32506

\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

Cynthia Cole

\_\_\_\_\_  
(Name of Person)

850

221-3743

at (\_\_\_\_\_) \_\_\_\_\_

(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

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

1. The name of a limited liability company is

Work/Life Consulting

2. The Articles of Organization were filed on Oct 21, 2021 and assigned

document number 418-92-4120

3. The delayed effective date the dissolution is not effective on the date of filing: Feb 24, 2021

(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).

Dissolution due to lack of employment opportunities

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

Cynthia Cole

734 Berkley Drive

Pensacola, FL 32506

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:

Cynthia Cole

Signature

Cynthia Cole

Printed Name

**FILING FEE: \$25.00**

FILED  
2022 MAR 23 AM 8:33  
STATE OF FLORIDA  
DEPARTMENT OF STATE