

L21000495620

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

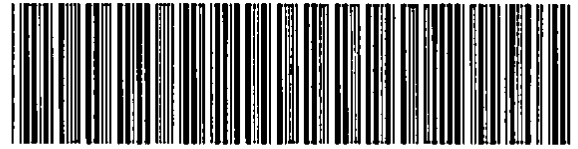
(Business Entity Name)

(Document Number)

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

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TALLAHASSEE, FL

Y SULKER  
JAN 06 2022

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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 21, 2021

FELICIA WESTBROOKS  
921 WINDTON OAK DRIVE  
RUSKIN, FL 33570

SUBJECT: WOMEN AFTER GOD'S OWN HEART, LLC  
Ref. Number: L21000495620

We have received your document for WOMEN AFTER GOD'S OWN HEART, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A Florida limited liability company cannot convert into another Florida limited liability company. Pursuant to s. 605.0102(23)(a), F.S., "the term 'other business entity' or 'another business entity' means a common law or business trust or association; a real estate investment trust; a general partnership, including a limited liability partnership; a limited partnership, including a limited liability limited partnership; or any other domestic or foreign entity that is organized under a governing law or other applicable law, provided such term shall not include a domestic limited liability company."

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Yasemin Y Sulker  
Regulatory Specialist III

Letter Number: 221A00030849

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Women After God's Own Heart, 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:

Felicia Westbrook  
(Name of Person)  
Women After God's Own Heart, LLC  
(Firm/Company)  
921 Winton Oak Drive  
(Address)  
Ruskin, FL 33570  
(City/State and Zip Code)

For further information concerning this matter, please call:

Felicia Westbrook at 813, 270-3495  
(Name of Person) (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

Women After God's Own Heart, LLC

2. The Articles of Organization were filed on 11.18.2021 and assigned

document number L21000495620

3. The delayed effective date the dissolution if not effective on the date of filing: 11.18.2021  
(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).

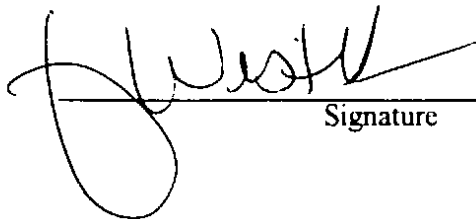
Our intention is to immediately start  
a new business e.g. Florida Non-Profit  
Corporation, which will benefit the  
company in a greater capacity.

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

Felicia Westbrook, Founder  
President

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CLERK OF STATE  
TALLAHASSEE, FL

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

Felicia Westbrook  
Printed Name

**FILING FEE: \$25.00**