

L2100052197a

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

(Business Entity Name)

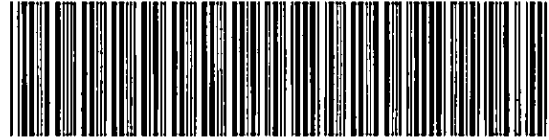
(Document Number)

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

Special Instructions to Filing Officer:

J. HORNE  
MAR 29 2023

Office Use Only



600400017806

01/23/23--01022--025 \*\*55.00

2023 JAN 23 AM 11:27  
SECRETARY  
FALLSBORO, NJ  
D  
D

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: HEALTH CENTERED LIFE, 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:

RONALD A. BAUMGART JR  
(Name of Person)

HEALTH CENTERED LIFE, LLC  
(Firm/Company)

9287 COACH HOUSE LN  
(Address)

ESTERO, FL 33928  
(City/State and Zip Code)

For further information concerning this matter, please call:

RONALD A. BAUMGART at (239) 3087464  
(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

2023 JAN 23 AM 11:27  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

10

1. The name of a limited liability company is  
HEALTH CENTERED LIFE

2. The Articles of Organization were filed on 3/10/22 and assigned  
document number L21000521972

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)

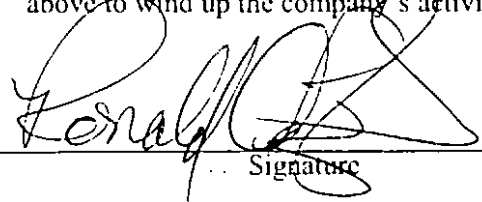
**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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).

BUSINESS IS NOT SUCCESSFUL

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

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

RONALD A. BAUMGART II  
Printed Name

FILING FEE: \$25.00