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(Re	equestor's Name)			
. (Ad	ddress)			
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(Ci	ty/State/Zip/Phon	e #)		
PICK-UP	WAIT	MAIL		
(Bu	usiness Entity Nar	me)		
(Document Number)				
Certified Copies	_ Certificate:	s of Status		
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01/22/24--01022--017 **25.00

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COVER LETTER

TO: Registr	ration Section on of Corporations	
SUBJECT:	Dee's F	me of Limited Liability Company)
	rticles of Dissolution and fee(s	
	Dawren	(Name of Person)
		(Name of Person) (Firm/Company) (Firm/Company) (Address) (Address) (City/State and Zip Code)
_	rmation concerning this matter.	
_	ek for the following amount: Filing Fee and Certificate of Disso	olution
Regis Divis	ng Address: stration Section ion of Corporations Box 6327	Street Address: Registration Section Division of Corporations The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

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.

Document number of Limited Liability Company is: <u>\(\) 230000 95370</u> Date of dissolution was: <u>\(\) 2/5/2023</u> Description of information that must be included in a written claim: Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
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winter nayer.
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.

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

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ì.	The name of a limited liability company is
	Dees Fitness
2.	The Articles of Organization were filed on $02/22/23$ and assigned document number $02/22/23$
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 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 section 605.07.07. Florida Statutes, (copy 605.0707 on back cover letter).
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. ab	Signature of an authorized person or if there are no members, the signature of the person appointed and listed ove to wind up the company's activities and affairs:
	Dewrence Hutley Signature Printed Name

FILING FEE: \$25.00