P11000030419

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

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05/18/16--01012--013 **10.00

04/04/16--01026--005 **25.00

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SEGRETARY OF STATE

MAY 19 2016

C LEWIS



April 22, 2016

ARLANE DIGIOVANNI / BE STILL INC 10517 TARPON SPRINGS RD ODESSA, FL 33556 US

SUBJECT: BE STILL INC. Ref. Number: P11000030419

We have received your document for BE STILL INC. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above entity is a Florida corporation and the document and fee submitted are for a Florida limited liability company. The correct form is enclosed and an additional filing fee of \$10.00 is due.

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

Letter Number: 516A00008412

Carolyn Lewis Regulatory Specialist II

www.sunbiz.org

COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: Be Still, TNC.	
DOCUMENT NUMBER: P11000030419	
The enclosed Articles of Dissolution and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Arlane Dibioyanni	
(Name of Contact Person)	
Be Still, INC. (Firm/Company)	
(Firm/Company)	
10517 TARPON SPrINGS Rd.	
(Address)	
Odessa, FL 33556 (City/State and Zip Code)	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
Arlane Di Giovanni at (813) 3350551 (Name of Contact Person) (Area Code) (Daytime Telephone Number)	
Enclosed is a check for the following amount:	
\$35 Filing Fee \$\to\$	
MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301	

ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST:	The name of the corporation as currently filed with the Florida Department of State: Be Still INC.
SECOND:	The document number of the corporation (if known): P11000030419
THIRD:	The date dissolution was authorized: March 1st, 2016
	Effective date of dissolution if applicable: March 15t, 2016
	(no more than 90 days after dissolution file date) 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.
FOURTH:	Adoption of Dissolution (CHECK ONE)
	Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.
	☐ Dissolution was approved by the shareholders through voting groups.
	The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:
	The number of votes cast for dissolution was sufficient for approval by
	Arlane DiGiovanni, one vote
	(voting group)
	The number of votes cast for dissolution was sufficient for approval by Arlane DiGiovanni one vote (voting group) Signature: (By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)
	Arlane Di Giovanni (Typed or printed name of person signing)
	(Pres, VP, Secret & Juas.) (Title of person signing)

Filing Fee: \$35

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

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

Name of Corporation:
Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the <i>Articles of Dissolution</i> .
Description of information that must be included in a claim:
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenc within 4 years after the filing of this notice.
Printed Name of the Person Filing Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00