107000050728

(Re	equestor's Name)			
(Ac	ddress)			
(Ac	ddress)			
(Ci	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(В	usiness Entity Nan	ne)		
(Document Number)				
,	•			
Certified Copies	Certificates	s of Status		
Special Instructions to	Filing Officer:	•		





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03/31/08--01018--019 **25.00

OB MAR 31 PM 4: 01
SECRETARY OF STATE
FLORIDA

M. Thomas APR - 1 2008

COVER LETTER

TO: Registration :				
SUBJECT:	Dynamic Pl (Name of L	hysical Therapy	y UC	_
The enclosed Articles	of Dissolution and fee(s) are su	bmitted for filing.		
Please return all corres	spondence concerning this matte	er to the following:		
	Mandi	Kelley (Name of Person)		
		(Firm/Company)	·	
	9630 128th	Terr N. (Address)	<u>. </u>	08 *
	Largo, FL (City	33773 y/State and Zip Code)		PILED PH 4: 01 08 MAR 31 PM 4: 01 SECRETARY OF STATE PROPERTY OF S
For further information	n concerning this matter, please	call:		OF S.
ma	(Name of Person)	at (7)7) 45 (Area Code & Daytime	8 4459 Telephone Number)	ORIDA ORIDA ORIDA
Enclosed is a check for the	he following amount:			
\$25.00 Filing Fee	30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is end	
MA	ILING ADDDFSS.	STDEET/CAIN	DIFD ADDDESS.	,

MAILING ADDRESS

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is	
Dynamic Physical	Therapy LC
2. The Articles of Organization were filed on	5-07 and assigned document number
L07000050728.	
3. The date the dissolution was approved:3-2	1-2008
4. A description of occurrence that resulted in the limit 608.441, Florida Statutes, (copy 608.441 on back co	ed liability company's dissolution pursuant to section over letter).
Business partner had	financial difficulty of
and haved.	一 是等
5. CHECK ONE:	FIG
rg-OR-	imited liability company have been paid or discharged library lebts, obligations and liabilities pursuant to s. 608.4421.
 All remaining property and assets have been distributing rights and interests. 	ated among its members in accordance with their respective
7. CHECK ONE:	
There are no suits pending against the comp	pany in any court.
OR-	satisfaction of any judgment, order or decree which may be
Signatures of the members having the same percentage of	membership interests necessary to approve the dissolution:
Signature	Printed Name
March Kelley	Mandi Kellev
Kera J. Maset	Kera Maset
 	
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	,

FILING FEE: \$25.00