

LOI 000020382

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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FILED  
MAR 23 2004  
TALLAHASSEE, FLORIDA

LOI-20382  
AR



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

April 1, 2004

MARIKA CHASSE  
420 LEXINGTON AVENUE  
NEW YORK, NY 10170

SUBJECT: MOBILE HEALTH DIARY, LLC  
Ref. Number: L01000020382

We have received your document for MOBILE HEALTH DIARY, LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Number two of the document must contain the date the decision to dissolve was approved or became effective. This date must be prior to the date this document was submitted for filing.

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) 245-6020.

Tammi Cline  
Document Specialist

Letter Number: 004A00021299

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ATTORNEYS AT LAW  
GRAYBAR BUILDING | 420 LEXINGTON AVENUE | NEW YORK NY 10170  
212.687.6262 | FAX 212.687.3667 | BARTONESQ.COM

March 19, 2004

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

Re: Mobile Health Diary, LLC

Sir/Madam:

Enclosed please find Articles of Dissolution for Mobile Health Diary, LLC along with a check in the amount of \$55 payable to the Department of State for the required filing fee and certified copy. Kindly file the Articles of Dissolution accordingly and return a certified copy to our firm at the address as indicated on the letterhead above.

Thank you for your assistance with this matter. If you have any questions, please contact me at (212)687-6262 ext. 29.

Very truly yours,

  
Marika K. Chasse  
Legal Assistant

Enclosure

cc: Scott A. Lavin, Esq.

DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA  
MAY 11 PM 3:06

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**ARTICLES OF DISSOLUTION  
FOR  
A FLORIDA LIMITED LIABILITY COMPANY**

1. The name of the limited liability company is Mobile Health Diary, LLC
2. The effective date of the limited liability company's dissolution is April 1, 2004
3. A description of the occurrence that resulted in the limited liability company's dissolution pursuant to section 608.441, Florida Statutes, (copy of 608.441 on back of cover letter).

Upon the written consent of all of the members of the limited liability  
company.

4. **CHECK ONE:**

- ☒ All debts, obligations and liabilities of the limited liability company have been paid or discharged.  
-OR-  
☐ Adequate provision has been made for the debts, obligations and liabilities pursuant to s. 608.4421.

5. All remaining property and assets have been distributed among its members in accordance with their respective rights and interests.

6. **CHECK ONE:**

- ☒ There are no suits pending against the company in any court.  
-OR-  
☐ Adequate provision has been made for the satisfaction of any judgment, order or decree, which may be entered against it in any pending suit.

Signatures of the members having the same percentage of membership interests necessary to approve the dissolution:

Signature

Typed or Printed name

Joseph Nicholson

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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Filing Fee: \$25.00