

L03000023697

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

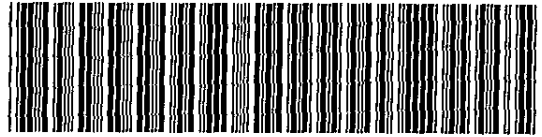
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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03/20/03--01042--003 **25.00

AL

August 17, 2003

Division of Corporations
Tallahassee, FL

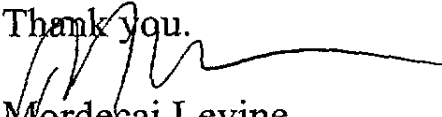
To Whom It May Concern:

Please dissolve the following LLC

Canada Discount Health Supply, LLC.

As of 7/15/03

Thank you.



Mordecai Levine
Member / Owner
President

561 573 0094

555 Old School Rd
Gulf Stream, FL 33483

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

1. The name of the limited liability company is Canada Discount
Health Supply LLC
2. The effective date of the limited liability company's dissolution is ~~7/15/03~~ 7/15/03
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).
We decided not to go into this business

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

[Signature]

Typed or Printed name

Mordecai Levine

Filing Fee: \$25.00