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(Re	questor's Name)		
(Ad	dress)		
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(Cit	y/State/Zip/Phone	:#)	
PICK-UP	☐ WAIT	MAIL	
− (Bu	siness Entity Nam	ne)	
(Do	cument Number)		
Certified Copies	Certificates	of Status	
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600030204546



ACCOUNT	NO.	:	07210000003

7387248 REFERENCE : 597538

AUTHORIZATION

COST LIMIT : \$ 55.00

ORDER DATE: April 28, 2004

ORDER TIME : 9:34 AM

ORDER NO. : 597538-005

CUSTOMER NO: 7387248

CUSTOMER: Mr. Ronald F. Geoghegan
Mr. Ronald F. Geoghegan
140 Heatherwood Drive

Royal Palm Beac, FL 33411

DOMESTIC FILINGS

NAME: ABLE BODIES, LLC

XX_ ARTICLES OF DISSOLUTION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX____ CERTIFIED COPY ___ PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Sara Lea - EXT# 2914

EXAMINER'S INITIALS:

ARTICLES OF DISSOLUTION FOR

A FLORIDA LIMITED LIABILITY COM 1. The name of the limited liability company is ABLE BODIES, LLC 2. The effective date of the limited liability company's dissolution is 3. A description of the occurrence that resulted in the limited liability company's dissolution pursuant to Oscition 608.441, Florida Statutes, (copy of 608.441 on back of cover letter). any money CHECK ONE: All debts, obligations and liabilities of the limited liability company have been paid or discharged. ☐ 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

Filing Fee: \$25.00