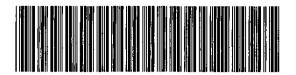
US4100086364

(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:	(Decreased Alexan)
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Requestor's Name)
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Address)
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	
PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Address)
PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	
(Business Entity Name) (Document Number) Certified Copies Certificates of Status	(City/State/Zip/Phone #)
(Business Entity Name) (Document Number) Certified Copies Certificates of Status	
(Document Number) Certified Copies Certificates of Status	PICK-UP WAIT MAIL
(Document Number) Certified Copies Certificates of Status	
Certified Copies Certificates of Status	(Business Entity Name)
Certified Copies Certificates of Status	
	(Document Number)
	Certified Copies Certificates of Status
Special Instructions to Filing Officer:	
Special Instructions to Filing Officer:	
	Special Instructions to Filing Officer:
$\sim 0 \sim 1$	$\sim \sim$
\ <i>\)(/</i>	\ \) \(\)

Office Use Only



200089933112

03/01/07-+01030--010 **25.00

O/ MAK - I FM IZ: 34
SECRETARY OF STATE



COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT: PEDIASTAFF AND COMPANY OF FLORIDA, LLC

(Name of Limited Liability Company)

The enclosed Articles of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Rhonda Herring, Paralegal		
(Name of Person)	_	
Phelps Dunbar, LLP		
(Firm/Company)	FAS	0
Post Office Box 1220	ECRE	07 MAR -1
(Address)	3	구 U
Tupelo	40.55 40.55	
(City/State and Zip Code)	101	$\frac{1}{2}$
For further information concerning this matter, please call:	RIDA	PH 12: 31
Rhonda Herring, Paralegal at (662) 842-7907 (Name of Person) (Area Code & Daytime Telephone N	I. m. h u. Y	
(Nea Code & Daytine Telephone N	umoer)	
Enclosed is a check for the following amount:		
Certificate of Status Certified Copy Certificate (additional copy is enclosed) Certified C	Filing Fee, e of Status & Copy al copy is en	&

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

 The name of a limited liability company is Pediastaff and Company of Florida, LLC 	
2. The Articles of Organization were filed on 11/30/04 L0400086364	and assigned document number
3. The date the dissolution was approved: 02/15/2007	
4. A description of occurrence that resulted in the limited liability company 608.441, Florida Statutes, (copy 608.441 on back cover letter). Winding up of company affairs, ceasing to	's dissolution pursuant to section do business as a ===============================
limited liability company.	HAS
	7.5
	नित्र है
5. CHECK ONE:	7. 3 7. 3 7. 3 7. 3 7. 3
All debts, obligations and liabilities of the limited liability compa	any have been paid or discharged.
-OR- Adequate provision has been made for the debts, obligations and	liabilities pursuant to s. 608.4421.
 All remaining property and assets have been distributed among its memberights and interests. 	ers in accordance with their respective
7. CHECK ONE:	
There are no suits pending against the company in any court.	
Adequate provision has been made for the satisfaction of any jude entered against it in any pending suit.	Igment, order or decree which may be
Signatures of the members having the same percentage of membership interests	s necessary to approve the dissolution:
Signature	Printed Name
Neidi & Kay Heidi	Kay, Sole Member and Manager
