

LOS000027450

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

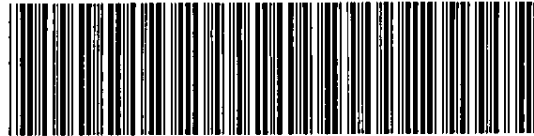
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EXAMINER



200213106182

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 FEB - 3 AM 8:57



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 082087 7869950

AUTHORIZATION

COST LIMIT \$ 25.00

ORDER DATE : February 2, 2012

ORDER TIME : 5:11 PM

ORDER NO. : 082087-005

CUSTOMER NO: 7869950

12 FEB -3 AM 8:57
SECRETARY OF STATE
FILED
CORPORATION SERVICE COMPANY

DOMESTIC FILINGS

NAME: SOUTH FLORIDA BEHAVIOR
CONSULTANTS, LLC

XX ARTICLES OF DISSOLUTION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Stephanie Milnes - EXT# 2920

EXAMINER'S INITIALS: _____

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

1. The name of a limited liability company is
SOUTH FLORIDA BEHAVIOR CONSULTANTS, LLC

2. The Articles of Organization were filed on 03/18/2005 and assigned document number
L05000027450

3. The date the dissolution was approved: 2/21/12

4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section
608.441, Florida Statutes, (copy 608.441 on back cover letter).
Retired

5. 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.

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

7. 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
Sue Noe

Printed Name
SUE NOE

FILING FEE: \$25.00

FILED
SECTION 608.441
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