L05000033183

| (Requestor's Name) | | |
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| (Address) | | |
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| (City/State/Zip/Phone #) | | |
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| PICK-UP WAIT MAIL | | |
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| (Business Entity Name) | | |
| 105-23103 | | |
| <u>L05 - 33183</u> (Document Number) | | |
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| Certified Copies Certificates of Status | | |
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| Special Instructions to Filing Officer: | | |
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Office Use Only



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SECRETARY OF STATE
SECRETARY OF STATE

N. Cultipun MAY 2 9 2000

COVER LETTER

| TO: Registration Section Division of Corporations |
|--|
| SUBJECT: Express Apsterny LLC (Name of Limited Eiability Company) |
| The enclosed Articles of Dissolution and fee(s) are submitted for filing. |
| Please return all correspondence concerning this matter to the following: |
| Efren E. Blanco (Name of Person) |
| |
| Express Apotherny, LCC |
| (Firm/Company) |
| Huy7 Morning Frust Pr. (Address) |
| Orland, Pl 32828 (City/State and Zip Code) |
| (City/State and Zip Code) |
| For further information concerning this matter, please call: |
| (Name of Person) at ($\frac{\sqrt{7}}{47}$) $\frac{774-436}{47}$ (Area Code & Daytime Telephone Number) |
| Enclosed is a check for the following amount: |
| \$25.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) \$25.00 Filing Fee & S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |

MAILING ADDRESS:

بل ۱۰ شده

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



May 19, 2008

EFREN E. BLANCO 14047 MORNING FROST DRIVE ORLANDO, FL 32828

SUBJECT: EXPRESS APOTHECARY, LLC

Ref. Number: L05000033183

We have received your document for EXPRESS APOTHECARY, LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A description of the occurrence that resulted in the limited liability company's dissolution pursuant to section 608.441, Florida Statutes, must be contained in the document.

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) 245-6067.

Letter Number: 908A00031663

Neysa Culligan Document Specialist

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

FILED

08 HAY 29 PM 2: 05

SECRETARY OF STATE FALLAHASSEE FLORIDA

| 1. The name of a limited liability company is | Confi |
|--|---|
| Express Dorheary Lie | |
| 2. The Articles of Organization were filed on Apr | and assigned document number |
| 3. The date the dissolution was approved: | 0F |
| 4. A description of occurrence that resulted in the lin 608.441, Florida Statutes, (copy 608.441 on back | nited liability company's dissolution pursuant to section cover letter). |
| The business was sold. | The lie is no house needed |
| The Alexander of the Al | |
| 5. CHECK ONE: | |
| All debts, obligations and liabilities of the | e limited liability company have been paid or discharged. e debts, obligations and liabilities pursuant to s. 608.4421. |
| | buted among its members in accordance with their respective |
| 7. CHECK ONE: | |
| There are no suits pending against the con-OR-Adequate provision has been made for the entered against it in any pending suit. | npany in any court. e satisfaction of any judgment, order or decree which may be |
| Signatures of the members having the same percentage of | of membership interests necessary to approve the dissolution: |
| Signature | Printed Name |
| Ach | Etra Blan |
| <i>[</i> | |
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