

LD5000099590

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

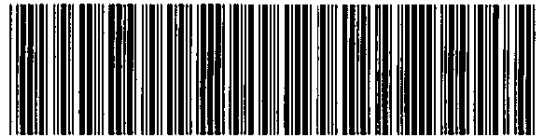
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100147894801

04/01/09--01011--023 **55.00

FILED
09 APR - 1 AM 11:26
SECRETARY OF STATE
TALLAHASSEE FLORIDA

N. Collins APR 2 - 2009

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Healing Works LLC
(Name of Limited Liability Company)

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

Please return all correspondence concerning this matter to the following:

John F Keys
(Name of Person)
Natco, a division of Wells Fargo Bank N.A.
(Firm/Company)
2000 Powell Street, 4th Floor
(Address)
Emeryville CA 94608
(City/State and Zip Code)

For further information concerning this matter, please call:

John F Keys at 954 903 8241
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee & Certificate of Status | <input checked="" type="checkbox"/> \$55.00 Filing Fee & Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee, Certificate of Status & Certified Copy
(additional copy is enclosed) |
|---|---|--|--|

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

FILED

09 APR -1 AM 11:26

SECRETARY OF STATE
TALLAHASSEE FLORIDA

1. The name of a limited liability company is

Healing Works, LLC

2. The Articles of Organization were filed on October 6 2005 and assigned document number

L05000099590

3. The date the dissolution was approved: MARCH 30 2009

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).

Subject is no longer in business. Sole member, John F Keys, has accepted out of state employment and will no longer reside in the State of Florida. effective April 2 2009.

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

Printed Name

John F Keys

John F Keys

