# NO5 000 100571

(Requestor's Name)
, (Address)
, (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:

M. THOMAS

APR 2 2 2009

EXAMINER

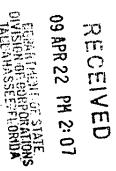
Office Use Only

205-100571



000150989080

04/22/09--01031--010 \*\*25.00



## **COVER LETTER**

Division of Corporations
SUBJECT: Superior Health & Empowerment, LLC (Name of Limited Liability Company)
(
$\cdot$
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Denise Redgrave
(Name of Person)
(Firm/Company)
MATA 1 10.0 C+
4050 Longleaf Ct.
Tallahassee, FL 32310
(City/State and Zip Code)
For further information concerning this matter, please call:
Denise Redgrave at (850) 284-3609 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \text{Certificate of Status} \]  \$30.00 Filing Fee & \text{Certified Copy} & \tex

### MAILING ADDRESS:

Registration Section

TO:

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

1. The name of a limited liability company is  Superior Health & Em	powerment
2. The Articles of Organization were filed on Oct, 15	2,2005 and assigned document number
3. The date the dissolution was approved: April 22	, 2009
4. A description of occurrence that resulted in the limited liabile 608.441, Florida Statutes, (copy 608.441 on back cover letter not doing business)	).
5. CHECK ONE:	
All debts, obligations and liabilities of the limited lia-OR- Adequate provision has been made for the debts, obl	
6. All remaining property and assets have been distributed amorrights and interests.	ng its members in accordance with their respective
7. CHECK ONE:	
There are no suits pending against the company in an -OR-	
Adequate provision has been made for the satisfaction entered against it in any pending suit.	on of any judgment, order or decree which may be
Signatures of the members having the same percentage of members	ship interests necessary to approve the dissolution:
Signature	Printed Name
Denise a. Redgrave	Denise A. Redgrave
— <del>-</del>	

**FILING FEE: \$25.00**