# LDOCCCOICHT

(Requestor's Name)				
LAW OFFICES				
FRESHMAN FRESHMAN & TRAITZ, P.A. 9155 SOUTH DADELAND BOULEVARD, SUITE 1014 MIAMI, FLORIDA 33156				
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(City/State/Zip/Phone #)				
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(Business Entity Name)				
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(Document Number)				
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SECRETARY OF STATE OF VISION OF CORPORATION

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### FRESHMAN FRESHMAN & TRAITZ

PROFESSIONAL ASSOCIATION

JERALD A. FRESHMAN LAWRENCE N. FRESHMAN JAMES J. TRAITZ

July 5, 2006

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9155 SOUTH DADELAND BOULEVARD SUITE 1014

MIAMI, FLORIDA 33156

TELEPHONE (305) 670-1400 TOLL FREE (800) 317-8525 FAX (305) 670 - 1410

Secretary of State **Division of Corporations** P. O. Box 6327 Tallahassee, Florida 32314

RE: A LOT LIKE FAMILY HEALTH CARE, LLC **DOCUMENT ID NUMBER UCSFL304** 

### Gentlemen:

Enclosed please find an original and one copy of the Articles of Dissolution of A LOT LIKE FAMILY HEALTH CARE, LLC and check in the amount of \$25.00 representing the filing fee. Please forward a copy of the Articles back to our office in the enclosed self-addressed stamped envelope.

Very truly yours,

LNF:lrg

Enclosure

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### FLORIDA DEPARTMENT OF STATE Division of Corporations

July 12, 2006

JERALD A. FRESHMAN, ESQUIRE 9155 S. DADELAND BLVD., SUITE 1014 MIAMI, FL 33156

SUBJECT: A LOT LIKE FAMILY HOME HEALTH CARE, LLC

Ref. Number: L06000001047

We have received your document for A LOT LIKE FAMILY HOME HEALTH CARE, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a corporation, but your entity is a limited liability company. Please complete and return the enclosed blank form(s).

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) 245-6911.

Letter Number: 406A00044868

Brenda Tadlock Senior Section Administrator

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

LAW OFFICES

## FRESHMAN FRESHMAN & TRAITZ

PROFESSIONAL ASSOCIATION

July 19, 2006

9155 SOUTH DADELAND BOULEVARD SUITE 1014 MIAMI, FLORIDA 33156

> TELEPHONE (305) 670-1400 TOLL FREE (800) 317-8525 FAX (305) 670 - 1410

JERALD A. FRESHMAN LAWRENCE N. FRESHMAN JAMES J. TRAITZ

> Secretary of State **Division of Corporations** P. O. Box 6327 Tallahassee, Florida 32314 Attention Brenda Tadlock

A LOT LIKE FAMILY HEALTH CARE, LLC **DOCUMENT ID NUMBER UCSFL304** 

Document No L06000001047 Letter No: 406A00044868

Dear Ms. Tadlock:

Thank you for your letter of July 12. I am enclosing the signed form and cover letter for the Articles of Dissolution. Please forward a copy of the Articles back to our office in the enclosed self-addressed stamped envelope.

truly yours,

ÆRALD A. FRESHMAN

LNF:lrg

Enclosure

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# **COVER LETTER**

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	on of Corporations	
SUBJECT:	A LOT LIKE FAMIL	Y HOME HEALTH CARE, LLC
	(Name of L	imited Liability Company)
		•
The enclosed A	rticles of Dissolution and fee(s) are su	bmitted for filing.
Please return all	l correspondence concerning this matte	er to the following:
	Jerald Freshman	(Name of Person)
	Freshman Freshman	
	0155 0	(Firm/Company)
	9155 S. Dadeland Bl	vd #1014
		(Address)
	Without TT one	
	Miami, Fla. 33156	y/State and Zip Code)
		,
For further info	rmation concerning this matter, please	call:
Lir	nda Grammes	at ( 305 ) 670-1400
<del></del>	(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a che	ck for the following amount:	
x \$25.00 Filing F	Fee 30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Sequence S
	MAILING ADDRESS:	STREET/COURIER ADDRESS:
	Registration Section	Registration Section
	Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building
	Tallahassee, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301

# ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is		L 2
A LOT LIKE FAMILY HOME HEAD	TH CARE IIC	
A DOI DIKE TANTET HOME HEAT	JIII CARE, ELC	ST ST
2. The Articles of Organization were filed on Jar	nuary 4, 2006 and assigne	ed document manbear
L0600001047		- X
<del></del> -		
3. The date the dissolution was approved:Jul	Ly 1, 2006	
4. A description of occurrence that resulted in the l 608.441, Florida Statutes, (copy 608.441 on back	imited liability company's dissolution purs k cover letter).	uant to section
- The parties and shareholders	s never started operation	of
the business and nodlonger w		health.
care business assirreconcili	lble differences arose	
		<del>*** </del>
5. CHECK ONE:		
All debts, obligations and liabilities of the OR-	he limited liability company have been paid	d or discharged.
	he debts, obligations and liabilities pursuan	nt to s. 608.4421.
<ol><li>All remaining property and assets have been dist rights and interests.</li></ol>	ributed among its members in accordance	with their respective
7. CHECK ONE:		
There are no suits pending against the co	Omnany in any court	
-OR-		
entered against it in any pending suit.	he satisfaction of any judgment, order or de	ecree which may be
Signatures of the members having the same percentage	o of manufacture interests managements and	
Signatures of the members having the same percentage	of memoersing interests necessary to appr	ove the dissolution:
Signature	Printed Nam	ie
1		
<del></del>	Jerald Freshman,	Managing Member
//	Reg Agent	<del>-</del>
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