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08 FEB | L PH 2: 07

SECRETARY OF STATE VISION OF CORPORATIONS

T. HAMPTON

FEB 1 5 2008

EXAMINER

COVER LETTER

	ation Section on of Corporations				
SUBJECT: Practicalories, LLC (Name of Limited Liability Company)					
The enclosed A	rticles of Dissolution and fee(s) are submitted for filing.				
Please return all	correspondence concerning this matter to the following:				
	Susan Mitchell (Name of Person)				
	(Firm/Company)				
	5415 Lake Howell Rd #246 (Address)				
	5415 Lake Howell Rd #246 (Address) Winter Park FL 32792-1033 (City/State and Zip Code)				
For further infor	mation concerning this matter, please call:				
<u>Su</u>	San Mitchell at (407) 629-1101 (Name of Person) (Area Code & Daytime Telephone Number)				
Enclosed is a check \$25.00 Filing F	ck for the following amount: See 30.00 Filing Fee & \$\ \text{S55.00 Filing Fee} & \$\ \text{Certificate of Status} & \text{Certified Copy.} & \tex				

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

February 1, 2008

Registration Section

Division of Corporations

P. O. Box 6327

Tallahassee, FL 32314

Dear Sir or Madame,

Consideration was given to change Practicalories, Inc. to an LLC. So Practicalories, LLC was opened during this consideration. However, the decision was made to keep Practicalories as a corporation. We are requesting dissolution of Practicalories, LLC on February 8, 2008.

Thank you.

Susan Mitchell, PhD, RD, FADA

Phone: 407-629-1101

no \$



RECEIVED

08 FEB 14 PH 12: 55

SECRETARY OF STATE TALLAHASSEE, FLORIDA

February 6, 2008

SUSAN MITCHELL 5415 LAKE HOWELL RD # 246 WINTER PARK, FL 32792-1033

SUBJECT: PRACTICALORIES, LLC

Ref. Number: L06000024850

We have received your document for PRACTICALORIES, LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

Number three of the document must contain the date the decision to dissolve was approved or became effective. This date must be prior to the date this document was submitted for filing.

Please return the corrected original and one copy of 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) 245-6855.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 908A00007824

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

08 FEB 14 PM 2: 07

1. The name of a limited liability company is Practicalories, LLC	001EB14 PM 2: U/
2. The Articles of Organization were filed on	arch 8, 2006 and assigned document number
3. The date the dissolution was approved: Feb	5. 1. 2008
	limited liability company's dissolution pursuant to section
Consideration was given to cho	ange Practicalories, Inc. to a LLC W
to Keep Practicalories as a	ation. However, the decision was made Conporation, we are requesting
dissolution of Practicalorie	<i>u</i>
5. CHECK ONE:	
	the limited liability company have been paid or discharged.
OR- Adequate provision has been made for t	the debts, obligations and liabilities pursuant to s. 608.4421.
All remaining property and assets have been dis rights and interests.	tributed among its members in accordance with their respective
7. CHECK ONE:	
There are no suits pending against the c	company in any court.
Adequate provision has been made for tentered against it in any pending suit.	the satisfaction of any judgment, order or decree which may be
ignatures of the members having the same percentag	e of membership interests necessary to approve the dissolution:
Signature	Printed Name
gre-Mitdell	Susan Mitchell
<u> </u>	