

LD6000064686

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

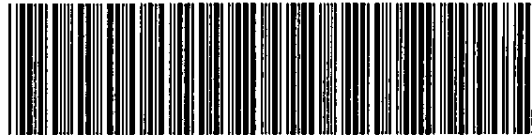
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

W/2000018003

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03/29/12--01011--023 **25.00

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12 APR 13 PM 3:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE
APR 13 2012
EXAMINER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 30, 2012

DAVID A. GROSS MD
4600 LINTON BLVD, SUITE 310
DELRAY BEACH, FL 33445

SUBJECT: LASER LIGHT THERAPEUTICS OF DELRAY BEACH, LLC
Ref. Number: W12000018003

We have received your document for LASER LIGHT THERAPEUTICS OF DELRAY BEACH, 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):

Our records show no entity by this name.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce
Regulatory Specialist II

Letter Number: 412A00010651

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Light Therapeutics
(Name of Limited Liability Company)

LLC

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

Please return all correspondence concerning this matter to the following:

DAVID A. GROSS MD
(Name of Person)

Laser Light Therapeutics of Delray Beach,
(Firm/Company)

LLC

4600 LINTON BLVD SUITE 310
(Address)

DELRAY BCH FL 33445
(City/State and Zip Code)

For further information concerning this matter, please call:

David A. Gross MD at (561) 496 1281
(Name of Person) (Area Code & Daytime Telephone Number)

12 APR 13 PM 3:54
CLERK OF SUPERIOR COURT
TALLAHASSEE, FLORIDA

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Enclosed is a check for the following amount:

- ☒ \$25.00 Filing Fee
☐ 30.00 Filing Fee & Certificate of Status
☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)
☐ \$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**

1. The name of a limited liability company is

Light Therapeutics LLC

2. The Articles of Organization were filed on 9/24/07 and assigned document number

LD6000064686

3. The date the dissolution was approved: Dec. 1, 2011

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).

Written Consent of all members of the LLC

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

[Signature]

[Signature]

Printed Name

David A. Gross MD

Andrew Rosen PhD

FILING FEE: \$25.00

FILE
12 APR 13 PM
CLERK OF DISTRICT COURT
TALLAHASSEE, FL