104000071885

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
		





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COVER LETTER

TO: Registration Section
Division of Corporations
SUBJECT: Supplement Your Life, LLC
(Name of Limited Liability Company)
The enclosed Articles of Dissolution and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Pamela Ferrara
(Name of person)
(Firm/Company)
(t initial company)
16810 Mid Summer Lane
(Address)
Soming Hill FL 24610
Spring Hill, FL 34610 (City/State and Zip Code) For further information concerning this matter, please call:
(City/state and Zip code)
For further information concerning this matter, please call:
The state of the s
Kirk D. Eicholtz, Esquire at (813) 639-7583
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\sqrt{1}\$\$ \$30.00 Filing Fee & \$\sqrt{5}\$\$ \$55.00 Filing Fee & \$\sqrt{6}\$\$ \$\$ \$60.00 Filing Fee, Certificate of Status & \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$
(additional copy enclosed) Certified Copy
(additional copy enclosed)

MAILING ADDRESS: Registration Section Division of Corporation P.O. Box 6327 Tallahassee, FL 32314

STREET/ COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 3230

ARTICLES OF DISSOLUTION FOR SUPPLEMENT YOUR LIFE, LLC, A FLORIDA LIMITED LIABILITY COMPANY

1.	The name of the limited liability company is			
	Supplement Your Life, LLC			
2.	The Articles of Organization were filed on July 19, 2006 and assigned document number <u>L060000871885</u> .			
3.	The date the dissolution was approved: March 26 th , 2007			
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). 			
Upon 1	the written consent of all of the members of Supplement Your Life, LLC			
5. √	CHECK ONE: All debts, obligations and liabilities of the limited liability company have SET ASS			
	been paid or discharged.			
	Adequate provision has been made for the debts, obligations and liabilities pursuant to s. 608.4421.	-: UJ		
6.	6. All remaining property and assets have been distributed among its members in accordance with their respective rights and interests.			
7.	CHECK ONE:			
\checkmark	There are no suits pending against the company in any courtOR-			
	Adequate provision has been made for the satisfaction of any judgement, order or decree which may be entered against it in any pending suite.			
-	gnatures of the members having the same percentage of membership interests cessary to approve the dissolution:			
· <u>1</u>	Signature Printed Name April Printed Name Pamela Ferrara Christopher Ferrara			