107000032989

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phon	<u>.</u>
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PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
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Certified Copies	_ Certificates	or Status
Special Instructions to	Filing Officer:	
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Office Use Only



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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Galil Dental Supply, LLC (Name of Limited Liability Control of	Company)	
The enclosed Articles of Dissolution and fee(s) are submitted for filing	.	
Please return all correspondence concerning this matter to the following	g:	
Anthony Oliver		
(Name of Person)		
(Firm/Company)	07 DEC SECRET	
P.O. Box 848922 (Address)	ASSET 24	
Pembroke Pines, FL 33084 (City/State and Zip Co	DEC 24 PM 4: 51 CRETARY OF STATE LAHASSEE. FLORID	
For further information concerning this matter, please call:	₽	
at (at (954) 336-2927	
(Name of Person)	(Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:		
✓ \$25.00 Filing Fee 30.00 Filing Fee & \$55.00 Filing Fee & Certificate of Status Certified (addition		
MAILING ADDRESS: Registration Section	STREET/COURIER ADDRESS: Registration Section	

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

L07000032989	sh 28, 2007 and assigned document number
3. The date the dissolution was approved: August	1, 2007
	ited liability company's dissolution pursuant to section
(c) Anthony Oliver is and was the only member	and this dissolution document serves s my consent
	7 DEC 20 CRETAR LAHASS
5. CHECK ONE:	FS 4
-OR-	debts, obligations and liabilities pursuant to s. 608.4421.
All remaining property and assets have been distributing rights and interests.	outed among its members in accordance with their respective
7. CHECK ONE:	
There are no suits pending against the com	npany in any court.
Adequate provision has been made for the entered against it in any pending suit.	satisfaction of any judgment, order or decree which may be
	of membership interests necessary to approve the dissolution:
gnatures of the members having the same percentage of	
gnatures of the members having the same percentage o	Printed Name
	Printed Name Anthony Oliver

FILING FEE: \$25.00