# L0700050362

| (Requestor's Name)                      |
|---|
| (Address)                               |
| (Address)                               |
| (City/State/Zip/Phone #)                |
|   |
| (Business Entity Name)                  |
| (Document Number)                       |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
|   |
|   |
|   |

Office Use Only



10/01/07-01008-013 \*\*25.00



AL

| COVER | LETTER |
|-------|--------|
|-------|--------|

TO: Registration Section Division of Corporations

ROGRESSIVE HEALTHWORKS OF FLORIDA, LLC SUBJECT: (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: JENNIFER E. WHITE (Name of Person) ROGRESSIVE HEALTHWORKS OF FLORIDA, LLC (Firm/Company) 4261 NE 13TH AVENUE (Address) POMPANO BEACH, FL (City/State and Zip Code)

For further information concerning this matter, please call:

<u>JENNIFER E. WHITE</u> (Name of Person) at (<u>954</u>) 829-8851 (Area Code & Daytime Telephone Shaper)

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  |            |     |
|----|---------------------------------|-------------|------------|-----|
|    | PROGRESSIVE                     | HEALTHWORKS | OF FLORIDA | LLC |

| 2. The Articles of Organization were filed on | MAY 11, 2007 | and assigned document number |
|---|--------------|------------------------------|
| L07000050362                                  |              |                              |

3. The date the dissolution was approved: SEPTEMBER 11, 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).

| (C) WRITIEN CONSENT OF ALL MEMBERS   | SOFTHE                       |
|--|------------------------------|
| LIMOTED LIABILITY COMPANY.   |                              |
|  |                              |
|  |                              |
| 5. CHECK ONE:  |                              |
| All debts, obligations and liabilities of the limited liability company l<br>OR-<br>Adequate provision has been made for the debts, obligations and liab | have been paid or discharger |

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:

| Jennely Signat | E. White |
|----------------|----------|
| - Dis S        | anter    |
| Clark          | G. Wen   |

| 1      | rinied Name |  |
|--------|-------------|--|
| JENNIF | ER E. WHITE |  |
| DAVIS  | SAPPER      |  |
| DEBOR  | AH A. WALL  |  |

. . . . . .

FILING FEE: \$25.00