

107000085340

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

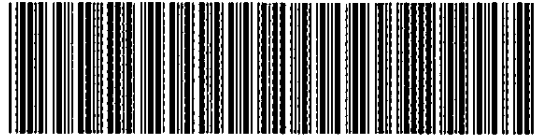
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G. MCLEOD

MAY 26 2009

EXAMINER



800155583828

05/07/09--01009--011 **25.00

FILED
SECRETARY OF STATE
DIVISION OF REVENUE
09 MAY 22 AM 10:36

Sign

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: True Potential Therapy, 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:

Lorie L. Saltzman

(Name of Person)

True Potential Therapy, LLC

(Firm/Company)

18303 Timberlan Dr.

(Address)

Lutz, FL 33549

(City/State and Zip Code)

For further information concerning this matter, please call:

Lorie L. Saltzman

(Name of Person)

at (813) 948-2028

(Area Code & Daytime Telephone Number)

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

09 MAY 22 AM 10:34

1. The name of a limited liability company is

True Potential Therapy, LLC

2. The Articles of Organization were filed on August 21, 2007 and assigned document number
L07000085340

3. The date the dissolution was approved: April 27, 2009

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).

Decision made to no longer operate this.

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

Lorie L. Saltzman

Printed Name

Lorie L. Saltzman

FILING FEE: \$25.00