

LO8000019480

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

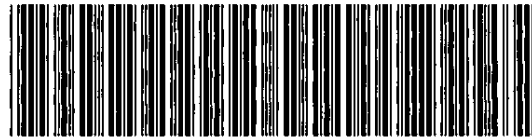
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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05/09/08--01015--007 **25.00

2008 MAY -9 AM 10:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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T. CLINE

MAY 12 2008

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: HELSEY HOME HEALTH 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:

RAUL PEREZ

(Name of Person)

HELSEY HOME HEALTH LLC

(Firm/Company)

801 MONTEREY STREET SUITE 205

(Address)

CORAL GABLES, FL 33134

(City/State and Zip Code)

For further information concerning this matter, please call:

RAUL PEREZ

(Name of Person)

at (786) 258-4718

(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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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**ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is
HELSEY HOME HEALTH LLC

2. The Articles of Organization were filed on **02/22/2008** and assigned document number
L08000019480

3. The date the dissolution was approved: **05/01/2008**

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).
DISAGREEMENT BETWEEN THE PARTNERS ON HOW TO OPERATE THE BUSINESS.

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 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.

FILED
2008 MAY -9 AM 10:50
CLERK OF STATE
TALLAHASSEE, FLORIDA

Signatures of the members having the same percentage of membership interests necessary to approve the dissolution:

Signature

Printed Name

Raul Perez
Mario Aleman

RAUL PEREZ

MARIO ALEMAN