

108000036749

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

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MAIL

(Business Entity Name)

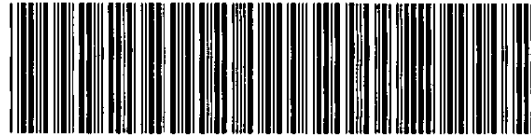
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

D. BRUCE  
JUN 15 2009  
EXAMINER

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** LOVING ARMS GROUP HOME, 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:

ICYLIN SAMPSON

(Name of Person)

LOVING ARMS GROUP HOME, LLC

(Firm/Company)

3510 SW 47 AVE

(Address)

WEST PARK, FL 33023 -5553

(City/State and Zip Code)

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09 JUN 12 AM 7:16  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

ICYLIN SAMPSON

(Name of Person)

at (

305)

904-5605

(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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 5, 2009

ICYLIN SAMPSON  
3510 SW 47 AVE  
WEST PARK, FL 33023-5553

SUBJECT: LOVING ARMS GROUP HOME, LLC  
Ref. Number: L08000036749

We have received your document for LOVING ARMS GROUP HOME, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A description of the occurrence that resulted in the limited liability company's dissolution pursuant to section 608.441, Florida Statutes, must be contained in the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6984.

Deborah Bruce  
Regulatory Specialist II

Letter Number: 309A00015134

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09 JUN 12 AM 7:16  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

1. The name of a limited liability company is

LOVING ARMS GROUP HOME, LLC

2. The Articles of Organization were filed on 04/10/2008 and assigned document number

L08000036749

3. The date the dissolution was approved: 04/23/09

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).

NO ACTIVITY SINCE DATE OF ORGANIZATION

**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

Icylin Sampson

Printed Name

ICYLIN SAMPSON

**FILED**  
09 JUN 12 AM 7:16  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**FILING FEE: \$25.00**