L08000057547

(Re	equestor's Name)	
(Ac	tdress)	
V · ·	,	
(Ac	ldress)	
(Ci	ty/State/Zip/Phon	e #)
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SECRETARY OF STATE
TALL AMASSEE, FLORID.

J. BRYAN
MAY -4 2009
EXAMINER

COVER LETTER

	VIDA, SALUD Y NUTRICION L.L.C. (Name of Limited Liability Company)	
The enclosed	Articles of Dissolution and fee(s) are submitted for filing.	
Please return	ll correspondence concerning this matter to the following:	
	CESAR A. BRENIS	
	(Name of Person)	O9 MAY SECRE
	(Firm/Company)	ASS - F
	4235 N. UNIVERSITY DR. BLDG.9 APT. 108	PH 2: 20
	(Address)	STA STA
	SUNRISE, FL 33351	RIE
	(City/State and Zip Code)	
For further inf	ormation concerning this matter, please call:	
CE	SAR A. BRENIS at 754 214 7712	
	(Name of Person) (Area Code & Daytime Telephone Number	ber)
Enclosed is a ch	eck for the following amount:	
/ \$25.00 Filing	Certificate of Status Certified Copy Certificate of (additional copy is enclosed) Certified Copy	Status &

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			T.S.	4
VIDA, SALUD Y NUTRICION L.L.	.C.		<u> </u>	25
2. The Articles of Organization were filed on L08000057547	- 14 - 08	and assigned d	locument nu	ımbe
3. The date the dissolution was approved: 04 - 2	<u> 1</u> 9 - 09	 		
4. A description of occurrence that resulted in the li 608.441, Florida Statutes, (copy 608.441 on back		npany's dissolution pursuar	nt to section	ì
We didn't expect or reached what			·····	
5. CHECK ONE:		1.00		 -
All debts, obligations and liabilities of the OR- Adequate provision has been made for the	_	-	•	
6. All remaining property and assets have been distrights and interests.	ributed among its n	nembers in accordance with	h their respe	ective
7. CHECK ONE:				
There are no suits pending against the co	ompany in any com	rt.		
Adequate provision has been made for the entered against it in any pending suit.	he satisfaction of ar	ny judgment, order or decre	ee which ma	ay be
gnatures of the members having the same percentage	of membership in	terests necessary to approve	e the dissolu	ution:
Signature		Printed Name		
hundred	CE	SAR A. BRENIS	<u>, </u>	
l		,		-

	-			
		100		

FILING FEE: \$25.00