

L09000035398

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

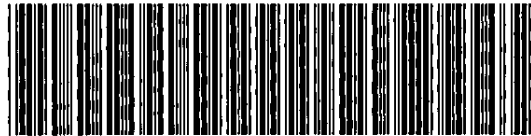
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500260888105

06/10/14--01019--011 **25.00

FILED
14 JUN 10 AM 10:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: HENELL MED, 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:

Nayarit Briceno

(Name of Person)

BW&T Business Advisers, Inc.

(Firm/Company)

3600 Red Road, Suite 301

(Address)

Miramar, FL 33025

(City/State and Zip Code)

For further information concerning this matter, please call:

Nayarit Briceno

(Name of Person)

at (954) 443-1594

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

✓ \$25.00 Filing Fee and Certificate of Dissolution

— \$55.00 Filing Fee, Certificate of Dissolution &
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

HENELL MED, LLC

2. The Articles of Organization were filed on April 13, 2009 and assigned

document number L09000035398

3. The delayed effective date the dissolution if not effective on the date of filing: _____
(effective date cannot be prior to or more than 90 days later than date document is received for filing)

4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).

Entity was a Sole Member and its operations were not sufficient to maintain

the costs associated with it.

Management decided to close the business effective December 31, 2012, when

final returns were filed with the IRS and Florida Department of Revenue

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs: _____

6. Signature of an authorized person or if there are no members, the signature of the person appointed and listed above to wind up the company's activities and affairs:

* Johenell Alvarez
Signature

Johenell Alvarez, Manager/Sole Member
Printed Name

FILING FEE: \$25.00

14 JUN 10 AM 1:36
STATE OF FLORIDA
TALLAHASSEE