

LOGO00084731 ✓

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

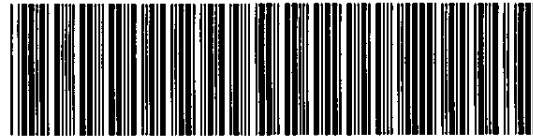
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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02/20/12--01051--014 **30.00

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12 FEB 20 PM 4:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. BOSTICK

FEB 21 2012

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Redefine Image Anesthetic Center 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:

Gonzalo Mosquera
(Name of Person)

Gonzalo Mosquera MD LLC
(Firm/Company)

1129 NIKKI VIEW DR
(Address)

Brandon FL 33511
(City/State and Zip Code)

RECEIVED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
12 FEB 20 PM 4:12

For further information concerning this matter, please call:

Gonzalo Mosquera at (813) 511 3311
(Name of Person) (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**

1. The name of a limited liability company is

Redefined Image Aesthetic Center LLC

2. The Articles of Organization were filed on 9/01/2009 and assigned document number

LO9000084731

3. The date the dissolution was approved: Feb 1/2012

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).

after moving to 1129 Nikki View Dr
Brandon. 33511 experienced a drastic
decreased in Business and profits

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

Printed Name

[Handwritten Signature]
manager owner

Gonzalo Mosqueda

STATE OF FLORIDA
2 FEB 20 11 4:12
TALLAHASSEE

FILING FEE: \$25.00