## Florida Department of State

Division of Corporations Public Access System

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· Division of Corporations

Fax Number : (850)617-6383

Account Name : LEGALZOOM.COM INC.

Account Number : 120010000062

Phone

1 (323)962-8600

Fax Number

: (323)962-3889

## LLC DISS/WITH OR REV DISS

ADVANCED WELLNESS SOLUTIONS, LLC

Certificate of Status	0
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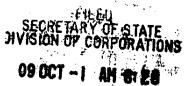
EXAMINER

10/1/2009

## COVER LETTER

TO: Registration Division of	Section Corporations		
SUBJECT: ADV	ANCED WELLNESS SO		
	(Name of L	imited Liability Company)	
The enclosed Article	s of Amendment and fee(s) are su	ibmitted for filing.	
Please return all corr	espondence concerning this matte	er to the following:	
т.,			
10	ny Burroughs	(Name of Person)	
		,	
Le	egalzoom.com, Inc.	(Finn/Company)	
	•	(curio cinchan)	
<u>70</u>	183 Hollywood Blvd.		
		(Address)	
Lo	s Angeles, CA 9002	28	
	(City	y/State and Zip Code)	
Far tivethar informati	on concerning this matter, please	early	
FOI TOTURE, BITOTIMAN	on concerning this matter, please	cati:	
Tony Bu	ırroughs	at ( 323 ) 962-6 (Area Code & Daytime	3600
	(Name of Person)	(Area Code & Daytime	e Telephone Number)
Enclosed is a check for	the following amount:		
<b>∑</b> \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Re	AILING ADDRESS:	Registration Sec	
	vision of Corporations  O. Box 6327	Division of Cor Clifton Building	
	llahassee, FL 32314	2661 Executive	

2661 Executive Center Circle Tallahassee, FL 32301



## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

ADVANCED WELLNESS SOLUTIONS, LLC	
2. The Articles of Organization were filed on 09/15/20 L09000088782	09 and assigned document num
L09000088782	
3. The date the dissolution was approved: 09/26/09	
4. A description of occurrence that resulted in the limited 608.441, Florida Statutes, (copy 608.441 on back cove	liability company's dissolution pursuant to section r letter).
The limited liability company is no longer of	conducting business.
5. CHECK ONE:	
-OR-	ited liability company have been paid or discharged.
Adequate provision has been made for the deb	ts, obligations and liabilities pursuant to $s.608.4421.$
<ol> <li>All remaining property and assets have been distributed rights and interests.</li> </ol>	d-among its members in accordance with their respect
7. CHECK.ONE:	
There are no suits pending against the compan	y in any court.
OR- Adequate provision has been made for the sati	sfaction of any judgment, order or decree-which may
· ·	
matures of the members having the same percentage of me	embership interests necessary to approve the dissolution
Signature	Printed Name
Man Underson Member	Alan Anderson, Member
Carrier Composition, Marianer	
W	And the second s

FILING FEE: \$25.00