

L09000109893

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

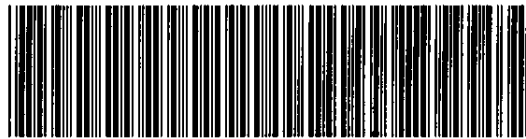
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800184959058

09/07/10--01022--003 **30.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION
10 DEC -3 AM 9:54

N. Culligan DEC -3 2010

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Patriot Health and Wellness 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:

Arash Mossafa

(Name of Person)

Patriot Health and Wellness

(Firm/Company)

1701 Hillmoor Dr. Ste: A-1

(Address)

Port St. Lucie, FL 34952

(City/State and Zip Code)

For further information concerning this matter, please call:

Arash Mossafa

(Name of Person)

at (914) 629-4148

(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

September 8, 2010

ARASH MOSSAFA
1701 HILLMOOR DRIVE
SUITE A-1
PORT ST. LUCIE, FL 34952

SUBJECT: PATRIOT HEALTH AND WELLNESS, LLC
Ref. Number: L09000109893

We have received your document for PATRIOT HEALTH AND WELLNESS, LLC and your check(s) totaling \$30.00. 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) 245-6067.

Neysa Culligan
Regulatory Specialist II

Letter Number: 610A00021373

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION

10 DEC -3 AM 9: 54

1. The name of a limited liability company is
Patriot Health and Wellness LLC

2. The Articles of Organization were filed on 11/16/2009 and assigned document number
L09000109893

3. The date the dissolution was approved: 07/27/2010

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).

BALANCE SHEET SHOWED A PROGRESSIVE NEGATIVE BALANCE

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.

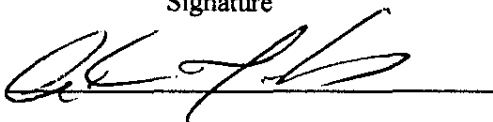
7. CHECK ONE:

- ☒ 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



Arash Mossafa