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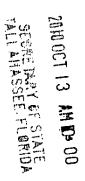
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EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: NUHEALTH SOLUTIONS 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:	
Juan C Rojas (Name of Person)	
7 c 20	
(Firm/Company)	427
5401 NW 2nd AVE APT 209	Į.
(Firm/Company) 5401 NW 2nd AVE APT 229 (Address) BOCA RATON FL, 33487 (City/State and Zip Code)	1 <u>1</u>
(City/State and Zip Code)	
For further information concerning this matter, please call:	
Cowlos Rojos at 561 212-9872 (Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:	
\$25.00 Filing Fee Certificate of Status S55.00 Filing Fee & S60.00 Filing Fee, Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building	

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is NUHEALTH SOLUTIONS, LLC	,		
2. The Articles of Organization were filed on 12/1 L09000118797	11/2009	and assigned docur	nent number
3. The date the dissolution was approved:	1-10	•	
4. A description of occurrence that resulted in the lir 608.441, Florida Statutes, (copy 608.441 on back Directors Approved	nited liability company's cover letter).	dissolution pursuant to s	section
		AS	[3] E
5. CHECK ONE: ✓ All debts, obligations and liabilities of the	timical lighting	A	OCT I
-OR-Adequate provision has been made for the	e debts, obligations and lia	abilities pursuant to s. 6	08.4721.
rights and interests. 7. CHECK ONE:		Ö	00
There are no suits pending against the correct of the Adequate provision has been made for the entered against it in any pending suit.		nent, order or decree wl	hich may be
Signatures of the members having the same percentage	of membership interests ne	ecessary to approve the	dissolution:
Signature	Juan	Printed Name	