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(Requestor's Name)			
(Address)			
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PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
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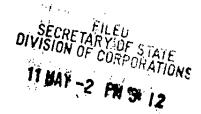
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N. Culligan MAY _ 4 20111

COVER LETTER

Division of Corp		
SUBJECT:	SUNRISE CHIROPRACTIC ,LLC	
	(Name of Limited Liability Company)	
The enclosed Articles of	Dissolution and fee(s) are submitted for filing.	
Please return all correspo	ndence concerning this matter to the following:	
	(Name of Person)	
	(Firm/Company)	
	PO BOX 581159 (Address)	
<u> </u>	(City/State and Zip Code)	
For further information c	oncerning this matter, please call:	
TAMM	(Name of Person) at (407) 288 3949 (Area Code & Daytime Telephone Number	?)
Enclosed is a check for the	ollowing amount:	
\$25.00 Filing Fee	30.00 Filing Fee & \$55.00 Filing Fee & \$60.00 Filing Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy (addi	atus &
Regis Divisi P.O. I	LING ADDRESS: stration Section on of Corporations on of Corporations Box 6327 classee, FL 32314 STREET/COURIER ADDRE Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	ESS:

ARTICLES OF DISSOLUTION . FOR A LIMITED LIABILITY COMPANY



1. The name of a limited liability company is	J
SUNRISE CHIROPR	XCTIC, LC 1
2. The Articles of Organization were filed on	and assigned document number
3. The date the dissolution was approved:	20/2011
4. A description of occurrence that resulted in the limite 608.441, Florida Statutes, (copy 608.441 on back co	ed liability company's dissolution pursuant to section ver letter).
TO LONGE	ZIH BUTINEST
5. CHECK ONE:	
All debts, obligations and liabilities of the li	mited liability company have been paid or discharged.
OR- Adequate provision has been made for the d	ebts, obligations and liabilities pursuant to s. 608.4421.
6. All remaining property and assets have been distriburights and interests.	ted among its members in accordance with their respective
7. CHECK ONE:	
There are no suits pending against the comp	any in any court.
Adequate provision has been made for the seen tered against it in any pending suit.	atisfaction of any judgment, order or decree which may be
gnatures of the members having the same percentage of	membership interests necessary to approve the dissolution:
Signature	Printed Name
	TAM M HOXNA
There	
<u> </u>	