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## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: Liberty Wellness Center LLC (Name of Limited Liability Company)		
/ (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:		
Oavid Packer (Name of Person)		
Liberty Wellness Center UC		
1402 NW 30H Street		
Gaines VIIIE, FL 32605 (City/State and Zip Code)		
For further information concerning this matter, please call:		
David Packov at 321, 698-0047		
(Name of Person) (Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount:		
\$25.00 Filing Fee Certificate of Status  S55.00 Filing Fee & Certified Copy (additional copy is enclosed)  \$60.00 Filing Fee, Certified Copy (additional copy is enclosed)		
MAILING ADDRESS:  Registration Section  Division of Corporations  P.O. Box 6327   STREET/COURIER ADDRESS:  Registration Section  Registration Section  Division of Corporations  Clifton Building  Division of Corporations  Clifton Building		
Tallahassee, FL 32314  Tallahassee, FL 32301  Tallahassee, FL 32301		

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liability, company is  Liberty Wellness Center	er LLC
2. The Articles of Organization were filed on $\frac{0ct84c}{200}$	and assigned document number
3. The date the dissolution was approved: December 29th	2010.
4. A description of occurrence that resulted in the limited liability company's d 608.441, Florida Statutes, (copy 608.441 on back-cover letter).  Registration of Medic	. A.
5. CHECK ONE:  All debts, obligations and liabilities of the limited liability company  Adequate provision has been made for the debts, obligations and liab	
6. All remaining property and assets have been distributed among its members rights and interests.	in accordance with their respective
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 judgmentered against it in any pending suit.	ent, order or decree which may be
Signatures of the members having the same percentage of membership interests ne	cessary to approve the dissolution:
Signature Signat	Printed Name  AUDICA PARTE IARRY  Printed Name  AUDICA PRINTED IARRY  PRINTED IAR
	Y OF STATE