

L110000053723

(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:

L. SELLERS

Sept. 9, 2011

EXAMINER

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14 SEP - 8 PM 2:03

FILED

From The Desk of

Lorraine **A.H**amilton

1035 Gateway Boulevard #201-249
Boynton Beach, Florida 33426
(407) 704-9913 (561) 880-8385
lorraineKnight@ymail.com



"There are no constraints on the human mind,
no walls around the human spirit, no barriers to
our progress except those we ourselves erect".

To: The Florida Department of State

Re: Palm Beach Advanced Medical Weight Loss Institute

Business Location: 1760 North Congress Avenue #200, Boynton Beach,
Florida 33426

The enclosed, completed form is my request for a dissolution of the above
named company (LLC).

If there are any questions, please do not hesitate to contact me at the above
contact information provided.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Palm Beach Advanced Medical Weight Loss Institute
(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:

Lorraine Hamilton

(Name of Person)

Palm Beach Advanced Medical Weight Loss Institute

(Firm/Company)

1760 No congress Avenue Suite #200

(Address)

Boynton Beach, Florida 33426

(City/State and Zip Code)

For further information concerning this matter, please call:

Lorraine A. Hamilton

(Name of Person)

at (407) 704-9913

(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

**ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is

Palm Beach Advanced medical Weight Loss Institute

2. The Articles of Organization were filed on May 6, 2011 and assigned document number L11000053723

3. The date the dissolution was approved: 7/15/2011 8/30/2011 L.H.

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).

The company never got off the ground. The MD supervisor decided to retire and I could not find another physician to form a equitable partnership.

There was no monetary agreements involved.

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

Lorraine A. Hamilton

FILING FEE: \$25.00

FILED
10 SEP - 8 | PM 2:03
TREASURY CLERK
FLORIDA