L12000098707

(Requestor's Name)		
(Ac	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		

Office Use Only

MAR 26 2013 B. KOHR



500245558445

DEPARTMENT OF STATE





ACCOUNT NO. : 12000000195

REFERENCE : 561780

AUTHORIZATION :

COST LIMIT : \$ 25.00

ORDER DATE: March 7, 2013

ORDER TIME : 9:10 AM

ORDER NO. : 561780-010

CUSTOMER NO: 7897837

DOMESTIC FILINGS

NAME: LIFEWORKS FOR YOU, LLC

XX ARTICLES OF DISSOLUTION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight - EXT# 52956

EXAMINER'S INITIALS:

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

A LIMITED LIABILITY COMPAN	Y to the second
The name of a limited liability company is LIFEWORKS FOR YOU, LLC	10 mg 25 mg
2. The Articles of Organization were filed on	and assigned document number
3. The date the dissolution was approved: March 15, 2012	<u> </u>
4. A description of occurrence that resulted in the limited liability company's 608.441, Florida Statutes, (copy 608.441 on back cover letter).	
Never was able to get organised and	dup x running
No Dusiness was over conducted	
5. CHECK ONE:	
 ★ All debts, obligations and liabilities of the limited liability compar -OR- □ Adequate provision has been made for the debts, obligations and I. 	•
 All remaining property and assets have been distributed among its member rights and interests. 	•
7. CHECK ONE:	
There are no suits pending against the company in any courtOR- Adequate provision has been made for the satisfaction of any judg entered against it in any pending suit.	ment, order or decree which may be
gnatures of the members having the same percentage of membership interests t	necessary to approve the dissolution
Signature	Printed Name
Signature GAYLE G. F	PRIMM