

L130000014867

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

(Business Entity Name)

(Document Number)

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2013 JUN -6 AM 8:32  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

J. SAULSBERRY  
EXAMINER  
JUN 7 2013

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Amara Skin Center of St. Petersburg, 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:

Samantha Grout

(Name of Person)

Amara Skin Center of Saint Petersburg, LLC

(Firm/Company)

Box 2124

(Address)

Saint Petersburg, FL 33731

(City/State and Zip Code)

2013 JUN -6 AM 8:32  
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OFFICE OF THE  
CLERK OF THE  
SUPREME COURT  
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Samantha Grout

(Name of Person)

at ( 415 ) 527-6271

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

ρ \$25.00 Filing Fee

ρ \$30.00 Filing Fee &  
Certificate of Status

ρ \$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

ρ \$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**

FILED  
2013 JUN -6 AM 8:22  
CLERK OF THE COURT  
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is  
Amara Skin Center of St. Petersburg, LLC

2. The Articles of Organization were filed on 1/31/13 and assigned document number  
L13000014867

3. The date the dissolution was approved: 4/25/13

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).

Never commenced any business in State of Florida. Would like to dissolve this LLC.

**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

Samantha Grout

Samantha Grout