

L14000000428

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Advanced Family Chiropractic of  
(Name of Limited Liability Company) Pensacola

The enclosed Articles of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Laney Wisniewski  
(Name of Person)

Self  
(Firm/Company)

8540 Monrovia Street #528  
(Address)

Lenexa, KS 66215  
(City/State and Zip Code)

For further information concerning this matter, please call:

Steele Smith at 850 206-8777  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

\$25.00 Filing Fee and Certificate of Dissolution

\$55.00 Filing Fee, Certificate of Dissolution &  
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

Advanced Family Chiropractic of pensacola

2. The Articles of Organization were filed on Jan. 2, 2014 and assigned

document number L14000000428

3. The delayed effective date the dissolution if not effective on the date of filing: Aug. 31<sup>st</sup> 2014  
(effective date cannot be prior to or more than 90 days later than date document is received for filing)

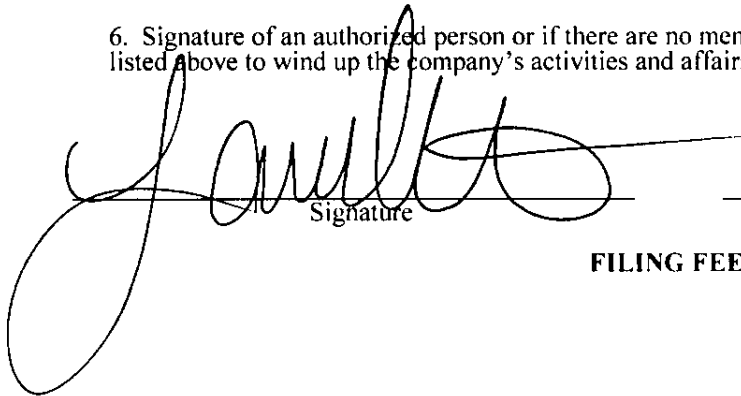
4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).

My husband and I have to move  
to Kansas and have to close  
our company. We could not sell it  
to another Doctor.

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:

Laney Wisniewski  
8540 Monrovia St.  
#528  
Lenexa, KS 66215

6. Signature of an authorized person or if there are no members, the signature of the person appointed and listed above to wind up the company's activities and affairs:

  
Signature

Laney Wisniewski  
Printed Name

**FILING FEE: \$25.00**