

L16000111322

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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2020 NOV 17 AM 11:58

NOV 18 2020

S. YOUNG



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 28, 2020

JORGE QUESADA  
TOWN CENTER FOR EATING DISORDERS LLC  
1640 TOWN CENTER CIRCLE #204  
WESTON, FL 33326

SUBJECT: TOWN CENTER FOR EATING DISORDERS LLC  
Ref. Number: L16000111322

We have received your document for TOWN CENTER FOR EATING DISORDERS LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LLC. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Shelia S Young  
Regulatory Specialist II

Letter Number: 220A00021496

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: TOWN CENTER FOR EATING DISORDERS  
(Name of Limited Liability Company) LLC

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

Please return all correspondence concerning this matter to the following:

THAIA QUESADA MD  
(Name of Person)

TOWN CENTER FOR EATING DISORDERS  
(Firm/Company)

1640 TOWN CENTER CIRCLE #204  
(Address)

WESTON, FL 33326  
(City/State and Zip Code)

For further information concerning this matter, please call:

SERGE QUESADA at 954 536-9456  
(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 Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

ARTICLES OF DISSOLUTION  
FOR  
A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is

TOWN CENTER FOR EATING DISORDERS, LLC

2. The Articles of Organization were filed on 6/8/2016 and assigned

document number L1600011322

3. The delayed effective date the dissolution is not effective on the date of filing: 11/10/20  
(effective date cannot be prior to or more than 90 days later than date document is received for filing)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

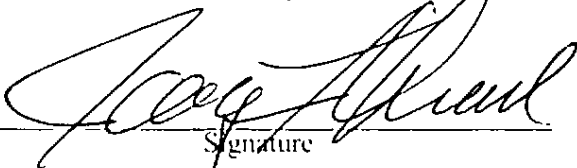
4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).

COULD NOT RUN IN HOUSE COURSES  
MOD CONSOLINE DUE TO COVID.

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

JORGE QUESADA, CFO  
13878 SW 43 ST  
DAVIE, FL 33330  
954-536-9456

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

JORGE T. QUESADA  
Printed Name

FILING FEE: \$25.00

2020 NOV 17 AM 11:58

FILED