

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
Phone : (305)552-5973
Fax Number : (305)675-5944

**LLC DISSOLUTION OR WITHDRAWAL
NEW LIFE MENTAL SOLUTION, LLC.**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

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

1. The name of a limited liability company is
New Life Mental Solution, LLC.
2. The Articles of Organization were filed on 01/20/2021 and assigned
document number L21000015678
3. The delayed effective date the dissolution if not effective on the date of filing:
(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).
The company closed because Medicaid stopped patients services.
5. If there are no members, enter the name and address of the person appointed to wind up the
company's activities and affairs:
Noelia Gelga Reyes Alonso
8820 SW 123 CT L210
MIAMI, 33186
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

Noelia G. Reyes

Printed Name

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