

A 98000000422

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

(Business Entity Name)

(Document Number)

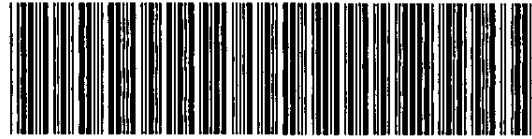
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

JUL 16 2013

S. TONER

Office Use Only



200249320792

07/01/13--01020--009 **52.50

FILED
13 JUL - 1 AM 10:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MedCyl Services, Ltd.

(Name of Florida Limited Partnership or Limited Liability Limited Partnership)

DOCUMENT NUMBER: A98000000422

The enclosed Statement of Dissociation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Karl E. Pearson, Esquire

(Contact Person)

Pearson Bitman LLP

(Firm/Company)

1770 Fennell Street, Suite 150

(Address)

Maitland, Fl 32751

(City, State and Zip Code)

For further information concerning this matter, please call:

Karl E. Pearson, Esquire

(Name of Contact Person)

at (407) 6470090

(Area Code and Daytime Telephone Number)



\$52.50 Filing Fee



\$105.00 Filing Fee and Certified Copy.

STREET ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

CR2E118 (01/06)

FILED

13 JUL -1 AM 10:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**STATEMENT OF DISSOCIATION
FOR
GENERAL PARTNER
OF
LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP**

Pursuant to the provisions of section 620.1605, Florida Statutes, the undersigned general partner hereby dissociates from the following limited partnership or limited liability limited partnership:

1. The name of Limited Partnership or Limited Liability Limited Partnership is:

MedCyl Services, Ltd.

2. The name of the dissociating general partner is:

Aeolus, Inc.

By: Robert W. Smith Jr
Signature of Dissociating General Partner

Aeolus, Inc.
President

Filing Fee: \$52.50

Certified Copy (optional): \$52.50