Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H11000073715 3)))

H11000073715 3ABCZ

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

RE-SUBMIT

Please retain original filing

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

date of submission 3/17

From:
Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850)222-1092
Fax Number : (850)878-5368

L. SELLERS

MAR 22 2011

EXAMINER

LLC DISSOLUTION OR WITHDRAWAL
SCI LIQUIDATION, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	$25.00

RECEIVED
11 MAR 21 PM 2:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED
11 MAR 17 AM 9:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu Corporate Filing Menu Help

March 18, 2011

FLORIDA DEPARTMENT OF STATE
Division of Corporations

SCI LIQUIDATION, LLC
207 LONGVIEW DRIVE
NORCROSS, GA 30071-2127

SUBJECT: SCI LIQUIDATION, LLC
REF: L00000010102

We have received your electronically transmitted document. However, the document was submitted under the wrong electronic filing type and cannot be processed by this office.

To proceed, you must abandon this filing and resubmit your filing under the appropriate electronic filing type.

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) 245-6967.

Leslie Sellers
Regulatory Specialist II

FAX Aud. #: H11000070898
Letter Number: 911A00006669

RE-SUBMIT
Please retain original filing
date of submission 3/17

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is
SCI Liquidation, LLC

2. The Articles of Organization were filed on August 17, 2000 and assigned document number
L00000010102

3. The date the dissolution was approved: March 14, 2011

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).
608.441(1)(c): upon written consent by SCH Liquidation, Inc., f/k/a Sun Coast Hospital, Inc.; the sole member of SCI Liquidation, 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
J. Michael Weathers	SCH Liquidation, Inc., f/k/a Sun Coast Hospital, Inc. By its Court Appointed Liquidating Agent, J. Michael Weathers

FILED
11 MAR 17 AM 9:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILING FEE: $25.00