

L99000006752

Florida Department of State

Division of Corporations  
Electronic Filing Cover Sheet

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To: Division of Corporations  
Fax Number : (850)617-6383  
From: Yvonne Mendez  
Account Name : GRAYROBINSON, P.A. - ORLANDO  
Account Number : I20010000078  
Phone : (407)843-8880  
Fax Number : (407)244-5690

LLC DISSOLUTION OR WITHDRAWAL  
PHYSICIANS DEVELOPMENT, L.C.

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

RECEIVED

2020 DEC 22 AM 11:55

20 DEC 22 AM 9:00

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Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is Physicians Development, L.C.

2. The Articles of Organization were filed on October 15, 1999 and assigned document number L99000006752

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) 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). The written consent of the members in accordance with the Company's operating agreement.

[Blank lines for description of occurrence]

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

[Blank lines for name and address]

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:

[Handwritten signature]

C. Scott Nunes, Manager Printed Name

FILING FEE: \$25.00

20 DEC 22 AM 9:00

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### Notice of Limited Liability Company Dissolution

**NOTE: This page is optional**

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution

Name of Limited Liability Company: Physicians Development, L.C.

Document number of Limited Liability Company is: L99000006752

Date of dissolution was: \_\_\_\_\_

Description of information that must be included in a written claim:

- 1. Name, address, telephone number and email address of claimant. \_\_\_\_\_
- 2. Amount of claim. \_\_\_\_\_
- 3. Date that claim arose. \_\_\_\_\_
- 4. Description of goods or services or matters giving rise to claim. \_\_\_\_\_

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

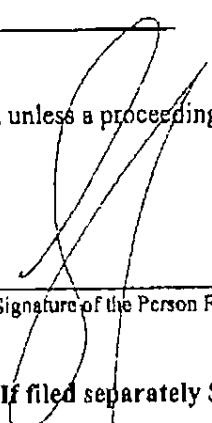
2200 S. Babcock Street

Melbourne, FL 32901

A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

C. Scott Nunes, Manager

Printed Name of the Person Filing

  
\_\_\_\_\_  
Signature of the Person Filing

**Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00**