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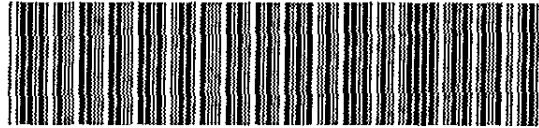
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SIGNATURE

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www.signaturepharmacy.com

Please accept this letter as notice of the dissolution of Signature Health Group, LLC.
Please send any correspondence regarding this matter to:

Naomi Loomis (formerly Naomi Stone)
9640 Weatherstone Court
Windermere, FL 34786

Thank you,



Naomi Loomis

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

1. The name of the limited liability company is Signature Health Group, LLC

2. The effective date of the limited liability company's dissolution is 12/31/02

3. A description of the occurrence that resulted in the limited liability company's dissolution pursuant to Section 608.441, Florida Statutes, (copy of 608.441 on back of cover letter).

1(c) - written consent, company sold.

4. **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.

5. All remaining property and assets have been distributed among its members in accordance with their respective rights and interests.

6. **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

Naomi Loomis

Typed or Printed name

Naomi Loomis

Filing Fee: \$25.00

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