

L000000 13576

(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:

Office Use Only



600128486896

05/05/08--01077--001 \*\*30.00

FILED

08 MAY -5 PM 12:59

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MA Thomas MAY -6 2008

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** JE-MED Supplies and Services, L.C.  
(Name of Limited Liability Company)

The enclosed Articles of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Edmund J. Schick

(Name of Person)

JE-MED Supplies and Services, L.C.

(Firm/Company)

PO Box 367736

(Address)

Bonita Springs, FL 34136

(City/State and Zip Code)

FILED  
08 MAY -5 PM 12:59  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

For further information concerning this matter, please call:

Edmund J. Schick

(Name of Person)

at ( 239 ) 948 2999

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☒ \$30.00 Filing Fee &  
Certificate of Status

☐ \$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☐ \$60.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

### MAILING ADDRESS:

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

### STREET/COURIER ADDRESS:

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

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

1. The name of a limited liability company is  
JE-MED Supplies and Services, L.C.

2. The Articles of Organization were filed on 3rd day of Nov 2000 and assigned document number  
L00000013576

3. The date the dissolution was approved: 10/31/2007

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).

The company was closed due to lack of sales.

**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.

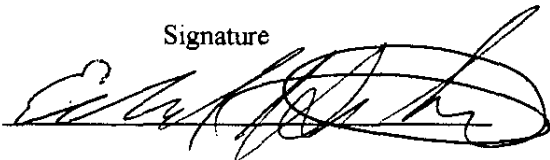
6. All remaining property and assets have been distributed among its members in accordance with their respective rights and interests.

**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

Edmund J. Schick

FILED  
MAY - 5 PM 12:59  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE