

**LO1000000743**  
Florida Department of State  
Division of Corporations  
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To:

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

From:

Account Name : HILL WARD HENDERSON  
Account Number : 972100000520  
Phone : (813) 221-3900  
Fax Number : (813) 200-5995

**LLC DISSOLUTION OR WITHDRAWAL  
CENTER PROPERTIES-LAKE ST. CHARLES MEDICAL  
CENTER, L**

Certificate of Status	0
Certified Copy	1
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RECEIVED  
2018 MAY 23 PM 4:59  
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DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA  
MAY 23 AM 8:56

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**ARTICLES OF DISSOLUTION  
OF  
CENTER PROPERTIES-LAKE ST. CHARLES MEDICAL CENTER, LLC**

**Article I**

The name of the limited liability company is Center Properties-Lake St. Charles Medical Center, LLC (the "Company").

**Article II**

The Articles of Organization of the Company were filed on January 16, 2001 and assigned document number L01000000743.

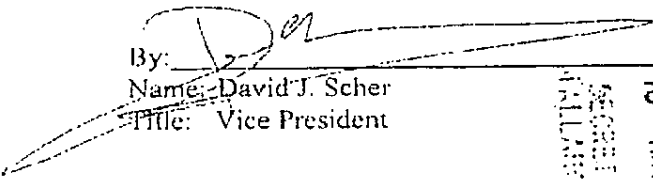
**Article III**

The effective date of the Company's dissolution is the date of the filing of these Articles of Dissolution.

**Article IV**

The Company is being dissolved pursuant to the Joint Action by Written Consent of the Members and Manager dated May 17, 2018.

CENTER PROPERTIES OF TAMPA BAY, INC.,  
as Manager

By:   
Name: David J. Scher  
Title: Vice President

FILED  
18 MAY 23 AM 8:56  
CLERK OF COURT  
HILL COUNTY, FLORIDA

((H18000159251 3)))

### Notice of Limited Liability Company Dissolution

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: Center Properties-Lake St. Charles Medical Center, LLC

Document number of Limited Liability Company is: L01000000743

Date of dissolution was: See Articles of Dissolution

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

If you feel that you have a possible claim, please contact in writing  
the person listed below with a detailed description of the nature and  
amount of the asserted claim.

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

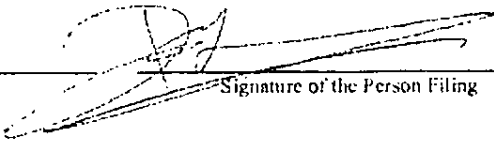
2535 Landmark Drive, Suite 106

Clearwater, Florida 33761

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.

David J. Scher

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

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