

LO1000002477

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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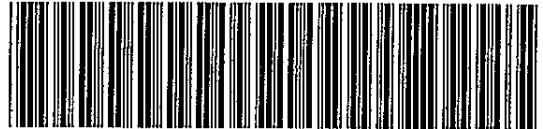
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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**TRANSMITTAL LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** FIFTH FAIRWAY ADULT CARE LLC  
(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:

JUDITH A. CALLISON  
(Name of Person)

\_\_\_\_\_  
(Firm/Company)

170 BREEZEWAY COURT  
(Address)

NEW SMYRNA BEACH, FL 32169  
(City/State and Zip Code)

For further information concerning this matter, please call:

JUDITH A. CALLISON at ( 386 ) 428-4083  
(Name of Person) (Area Code & Daytime Telephone Number)

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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)

**STREET ADDRESS:**  
Registration Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, Florida 32399

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

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

1. The name of the limited liability company is

FIFTH FAIRWAY ADULT CARE LLC

2. The date the dissolution was approved: AUGUST 24, 2004

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).

CEASED DOING BUSINESS

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 section 608.441.

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

Judith A. Callison

Typed or Printed name

JUDITH A. CALLISON

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
AUG 25 PM 1:11

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