L0100006340

ADVANCED PHYSICAL THERAPY
420 E. Alfred St.
Tavares, FL 32778

City/State/Zip   Phone #

800007657458--3
-09/11/02--01014--015
*****25.00   *****25.00

9|11 diss.

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

MJH

1. __L01-16340__
   (Corporation Name)   (Document #)

2. _____
   (Corporation Name)   (Document #)

3. _____
   (Corporation Name)   (Document #)

4. _____
   (Corporation Name)   (Document #)

☐ Walk in   ☐ Pick up time _____   ☐ Certified Copy

☐ Mail out   ☐ Will wait   ☐ Photocopy   ☐ Certificate of Status

NEW FILINGS

☐ Profit
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☐ Other

AMENDMENTS

☐ Amendment
☐ Resignation of R.A., Officer/Director
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

OTHER FILINGS

☐ Annual Report
☐ Fictitious Name

REGISTRATION/QUALIFICATION

☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

02 SEP 11 PM 1:44 FILED
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Examiner's Initials

CR2E031(7/97)

ARTICLES OF DISSOLUTION
FOR
A FLORIDA LIMITED LIABILITY COMPANY

1. The name of the limited liability company is _Advanced Physical Therapy of Lake County, LLC._

2. The effective date of the limited liability company's dissolution is _____ *(ONLY to Dissolve LLC effective whatever date shown)*

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).

    (was only set up as INC.) Never set up as LLC please dissolve the LLC

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	Typed or Printed name
(signature)	_DENISE MONERT_
(signature)	_ELMER BRIGNONI_

Filing Fee: $25.00