

# LD1000021179

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

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

**From:**

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TALLAHASSEE, FLORIDA

**LLC DISSOLUTION OR WITHDRAWAL  
CENTER FOR SURGERY & DIGESTIVE DISORDERS, L.L.C.**

Certificate of Status	0
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Page Count	04
Estimated Charge	\$25.00

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**C. LEWIS**

NOV 20 2012

**EXAMINER**

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** CENTER FOR SURGERY & DIGESTIVE DISORDERS, L.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:

Nick Rew

(Name of Person)

Waller Lansden Dortch and Davis, LLP

(Firm/Company)

511 Union Street, Suite 2700

(Address)

Nashville, TN 37219

(City/State and Zip Code)

For further information concerning this matter, please call:

Nick Rew

(Name of Person)

at ( 615 ) 850-8059  
(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 &  
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(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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATION

2012 NOV 19 AM 8:56

ARTICLES OF DISSOLUTION  
FOR  
A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is  
CENTER FOR SURGERY & DIGESTIVE DISORDERS, L.L.C.

2. The Articles of Organization were filed on 12/07/2001 and assigned document number  
LO1000021179

3. The date the dissolution was approved: 11/16/2012

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 written consent of all of the members of the limited liability company  
approving the dissolution:

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  
David Whalen

Printed Name

David Whalen, Vice President of Surgicare of Bayside, LLC

Pedro Greer, Chairman of CSDD Physicians, L.L.C.

FILING FEE: \$25.00

2012 NOV 19 AM 8:56

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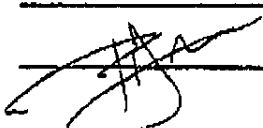
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	David Whalen, Vice President of Surgicare of Bayside, LLC
	Pedro Greer, Chairman of CSDD Physicians, L.L.C.

FILING FEE: \$25.00