

LA 0000007918

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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December 17, 2014

Florida Department of State
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

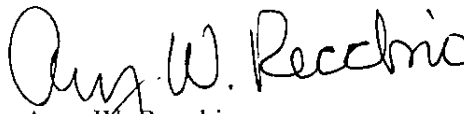
Re: Notice of Limited Liability Company Dissolution
Document ID: L02000007918

Dear Sir or Madam:

Enclosed for filing with your office is a Notice of Limited Liability Company Dissolution. Also enclosed is a check payable to the Florida Department of State in the amount of \$25.00 for the filing fee.

Should you have any questions, please contact me at 813-227-2359. Thank you in advance for your assistance.

Very truly yours,


Amy W. Recchio
Paralegal

Enclosures

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TALLAHASSEE FLORIDA

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 Section 605.0712, Florida Statutes.

Name of Limited Liability Company: Bayfront Same Day Surgery Center, LLC

Document number of Limited Liability Company; L02000007918

Date of dissolution was: The date Articles of Dissolution are filed with the Florida Department of State.

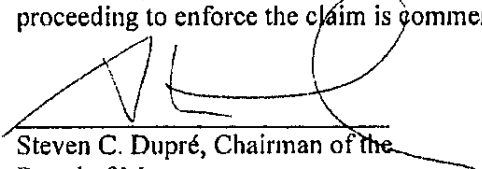
Description of information that must be included in a written claim:

- 1) Full name and address of claimant
- 2) Brief statement of the claim, including the date the claim arose and the amount of the claim, accompanied by a copy of all relevant documentation such as purchase orders or contracts and invoices.

Mailing address where claims can be sent:

744 6th Avenue South
St. Petersburg, FL 33701

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 filing of this notice.


Steven C. Dupré, Chairman of the
Board of Managers

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