P 001/002 F-899 88-85-2884 :35pm Ē. Florida Department of State Ally ALE STATE **Division of Corporations Public Access System Electronic Filing Cover Sheet** Note: Please print this page and use it as a cover sheet. Type the fax audi number (shown below) on the top and bottom of all pages of the document. (((H04000161617 3))) Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet. To: Division of Corporations : (850)205-0383 Fax Number From: : GREENBERG TRAURIG (WEST PALM BEACH) Account Name Account Number : 075201001473 Phone : (561)650-7900 Fax Number : (561)655-6222  $\underline{\Box}$ 50 JIVISION OF CORPORATI RECEIVEI N. LIMITED LIABILITY DISSOLUTION 04 AUG -5 THE LASIK VISION INSTITUTE 16, LLC Certificate of Status Û Certified Copy Ð Page Count 01 Estimated Charge \$25.00

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### 08-05-2004 06:05pm From-GREENBERG TRAURIG

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## ARTICLES OF DISSOLUTION FOR A FLORIDA LIMITED LIABILITY COMPANY

1. The name of the limited liability company is

The Lassk Vision Institute 16, LLC

2. The date the dissolution was approved: July 23, 2004

 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).

Pursuant to F.S. 608,441(1)(c), the sole member of the limited abbility company executed a written consent

to dissolution effective upon filing of these Articles of Dissolution. Dissolution upon consent of the member

is allowable under the limited liability company's articles of organization and operating agreement.

### 4. CHECK ONE:

- Adequate provision has been made for the debts, obligations and fiabilities pursuant to s. 608,4421.
- All remaining property and assets have been distributed among its members in accordance with their respective rights and interests.

#### 6. CHECKONE:

- 2 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 Ben Cook, CFO of The Lasik Vision Institute, LLC,

Its sole memoer

Filing Fee: \$25.00

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