

L03000026435

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

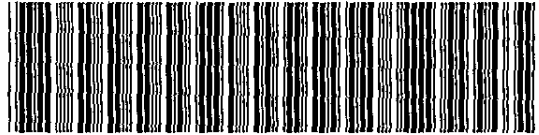
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300047547083

03/07/05--01007-- 001 **25.00

W203/08/05

FILED
2005 MAR -7 PM 4:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JAMES A. BARKS
ATTORNEY AT LAW
SUITE B
1120 WEST FIRST STREET
SANFORD, FLORIDA 32771

www.jamesbarks.com
jabarks@bellsouth.net

TELEPHONE (407) 321-1224
FAX (407) 321-1467

March 3, 2005

Registration Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

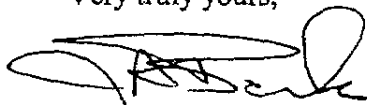
Re: Morpheus, A Center for Sleep Studies, LLC

Gentlemen:

Enclosed please find Articles of Dissolution and copy of same. I have also included my check payable to your order in the amount of \$25.00 to cover the required fee.

Thank you for your assistance.

Very truly yours,



James A. Barks

JAB/vam

Enclosures

FILED
2005 MAR -7 PM 4:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

1. The name of the limited liability company is

MORPHEUS, A CENTER FOR SLEEP STUDIES, LLC (Document # L03000026435)

2. The date the dissolution was approved: January 1, 2005

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).

Upon written consent of all of the members of the limited liability company

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:**

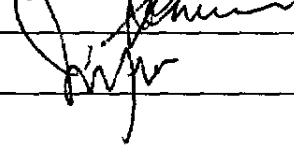
☒ There are no suits pending against the company in any court.

-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
SHAHNAZ CHIDA

MUBEEN H. CHIDA

FILED
2005 MAR -7 PM 4:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Filing Fee: \$25.00