

L04000017114

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

8/10/04

To : Department of State
Division of Corporations

From : Thomas P. Nolan
2860 Chapel Hill Court
Davie, FL
33328
954-475-4019

RE: Letter of acknowledgment of dissolution.

To whom it may concern,

Please issue me, at the above address, a letter of acknowledgment after the dissolution has been filed for the enclosed paper work.

Thanks for your help.

Thomas P. Nolan
Thomas P. Nolan

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: South Eastern Orthopedic Supplies LLC
(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:

Thomas P. Nolan
(Name of Person)

Southeastern Orthopedic Supplies LLC
(Firm/Company)

28600 Chapel Hill CT
(Address)

Dalton, FL 33328
(City/State and Zip Code)

For further information concerning this matter, please call:

Thomas P. Nolan at 954 475-4019
(Name of Person) (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 &
Certified Copy
(additional copy is enclosed)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

August 25, 2004

THOMAS P. NOLAN
2860 CHAPEL HILL COURT
DAVIE, FL 33328

SUBJECT: SOUTHEASTERN ORTHOPEDIC SUPPLIES, INC.
Ref. Number: L04000017114

We have received your document for SOUTHEASTERN ORTHOPEDIC SUPPLIES, INC. and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Articles of revocation of dissolution must indicate the date the revocation of dissolution was authorized.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6913.

Diane Cushing
Document Specialist

Letter Number: 804A00051958

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

1. The name of the limited liability company is

Southeastern Orthopedic Supplies LLC

2. The date the dissolution was approved: 7/25/04

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).

608.441 (c) consent of all members.

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 the 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

Thomas Nolan
Lawrence A Miller

Thomas Nolan
LAWRENCE A MILLER

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CLERK OF STATE
TALLAHASSEE, FLORIDA