

L04 0000 21225

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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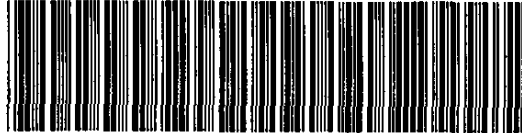
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 1st Coast CPR Limited Liability Company
(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:

Ms. Gail R. Harris

(Name of Person)

1st Coast CPR

(Firm/Company)

6839 Richardson Road

(Address)

Jacksonville, FL 32209

(City/State and Zip Code)

For further information concerning this matter, please call:

Gail R. Harris

(Name of Person)

at (904) 924-0757

(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)

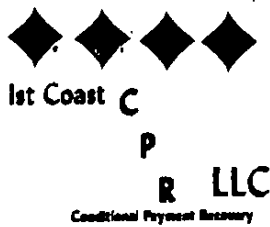
MAILING ADDRESS:

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

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TALLAHASSEE, FLORIDA



August 8, 2006

Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

To Whom It May Concern:

As noted in the Articles Of Dissolution For A Limited Liability Company, the following document serves as written consent by all members for the dissolution of the Limited Liability Company known as 1st Coast CPR, LLC.

The articles of organization were filed on March 19, 2004, and assigned document number L04000021225, however official business did not begin until July 20, 2004.

By mutual consent both members of the above-mentioned LLC have determined that it is no longer practical for this business to exist and therefore consent to its dissolution effective August 8, 2006 as noted by the signatures provided below.

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TALLAHASSEE, FLORIDA

Managing Member: Gail R. Harris Date: 8/8/06

Managing Member: Alma Glover Date: 8/8/06

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

1. The name of a limited liability company is

1st Coast CPR Limited Liability Company

2. The Articles of Organization were filed on **March 19, 2004** and assigned document number **L04000021225**

3. The date the dissolution was approved: **August 8, 2006**

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).

Pursuant to Section 608.441 1st Coast CPR, LLC elected to dissolve by written consent of all members. A copy of the written consent to dissolve is attached.

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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

Printed Name

Gail R. Harris
Almeanor Glover

Gail R. Harris

Almeanor Glover