L04000023003

(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:		
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08 JUL 25 PH 12: 24
SECRETARY OF STATE

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COVER LETTER

Division of Corporations		
SUBJECT: LANE OBH 1709, LLC (Name of Limited Liability Company)		
(Name of Emiliary Company)		
The énclosed Articles of Dissolution and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Curtis Lane (Name of Person)		
c/o MTS Heath Partners (Firm/Company)		
623 Fifth Avenue, 15th Floor		
New York, Ny 10022 (City/State and Zip Code)		
For further information concerning this matter, please call:		
Curtis Lane at (212) 887-2113 (Name of Person) (Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount:		
\$25.00 Filing Fee 30.00 Filing Fee & S55.00 Filing Fee & Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, Certified Copy (additional copy is enclosed)		

MAILING ADDRESS:

Registration Section

TO:

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



July 15, 2008

CURTIS LANE C/O MTS HEALTH PARTNERS 623 FIFTH AVENUE, 15TH FLOOR NEW YORK, NY 10022

SUBJECT: LANE OBH 1709, LLC Ref. Number: L04000023003

We have received your document for LANE OBH 1709, LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain the effective date of the limited liability company's dissolution.

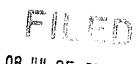
Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Neysa Culligan Document Specialist

Letter Number: 508A00041423

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY



OB JUL 25 PM 12: 24
SECRETARY DE STATE

1. The name of a limited liability company is	MELMANSSEE FLORIDA
LANE OBH 1709, LLC	
2. The Articles of Organization were filed on 3 25	and assigned document numbe
L04000023003	1
3. The date the dissolution was approved: $\frac{7/10}{08}$	
4. A description of occurrence that resulted in the limited I 608.441, Florida Statutes, (copy 608.441 on back cover	iability company's dissolution pursuant to section letter).
Transaction complete-	sale of unit.
5. CHECK ONE:	
All debts, obligations and liabilities of the limit	ed liability company have been paid or discharged.
-OR-	s, obligations and liabilities pursuant to s. 608.4421.
All remaining property and assets have been distributed rights and interests.	
7. CHECK ONE:	
There are no suits pending against the company	in any court.
-OR-	faction of any judgment, order or decree which may be
Signatures of the menubers having the same percentage of men	mbership interests necessary to approve the dissolution
Signature	Printed Name
	Curtis S. Lane

FILING FEE: \$25.00