

Electronic Filing Cover Sheet

SECRETARY OF STATE

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To:

Division of Corporations

Fax Number : (850) 205-0383

: CORPDIRECT AGENTS, INC. Account Name

Account Number : 110450000714 Phone (850) 222-1173 Fax Number : (850)224-1640

LIMITED LIABILITY DISSOLUTION

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Estimated Charge	\$25.00

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ARTICLES OF DISSOLUTION

A FLORIDA LIMITED LIABILITY COMPANY

I. The name of the limited liability company is	SECRETARY OF STATE TALLAHASSEE, FLORIDA	
TOWERS RETIREMENT HOME MANAGEMENT, LLC	: INCLAHASSEE, FLORIDA	
2. The date the dissolution was approved: 6/22/04		
 A description of the occurrence that resulted in the limited liability company's dissolution pursu int to section 608.441, Florida Statutes, (copy of 608.441 on back of cover letter). 		
UPON WRITTEN CONSENT OF ALL MEMBERS		
4. CHECK ONE: 2 All debts, obligations and liabilities of the limited OR.	liability company have been paid or discharg id.	
Adequate provision has been made for the debts,	obligations and liabilities pursuant to s. 608.4-21.	
All remaining property end assets have been distr respective rights and interests.	ibuted among its members in accordance with their	
 6. CHECK ONE: 2 There are no suits pending against the company is NR- 	any court.	
 OK- Adequate provision has been made for the satisfation be entered against it in any pending suit. 	ction of any judgment, order or decree which may	
Signatures of the members having the same percer the dissolution :	stage of membership interests necessary to a sprove	
Signature	Typed or Printed name	
	JOSH BENNETT	

Filing Fee: \$25.00

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TOWERS RETIREMENT HOME MANAGEMENT, LLC

THIS LIMITED LIABILITY COMPANY IS BEING DISSOLVED AND THE MEMBERS HAVE NO INTENT TO AND WILL NOT ATTEMPT TO RE-INSTATE THE COMPANY.

6/22/04

2004 JUN 24 A 9:49

SECRETARY OF STATE TALLAHASSEE, FLORIDA

JOSH FENNETT