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SECRETARY OF STATE
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COVER LETTER

то:	Registration Section Division of Corporations		
SUBJE	U.S. Medical Consultants of Florida, LLC		
	(Name of Limited Liability Company)		
The enc	sed Articles of Dissolution and fee(s) are submitted for filing.		
Please re	urn all correspondence concerning this matter to the following:		
	Clark E. Alpert, Esq.		
	(Name of Person)		
	Alpert Goldberg Norton Butler & Weiss, P.C.		
	(Firm/Company)	Ţ	
	449 Mt. Pleasant Avenue 至	-	
	(Address)		
		"	
	(City/State and Zip Code)		
For furt	er information concerning this matter, please call:		
	Clark E. Alpertat(973)325-1188		
	(Name of Person) (Area Code & Daytime Telephone Number)		
Enclosed	s a check for the following amount:		
\$25,00	Filing Fee 30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)		
	MAILING ADDRESS: STREET/COURIER ADDRESS:		
	Registration Section Registration Section		
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	•		
	Tallahassee, FL 32301	West Orange, New Jersey 07052 (City/State and Zip Code) (Area Code & Daytime Telephone Number) (Area Code & Daytime Telephone Number) (Area Code & Daytime Telephone Number) (Certificate of Status & Certificate of Status & Certificate of Status & Certificate of Status & Certified Copy (additional copy is enclosed) (AILING ADDRESS: (City/State and Zip Code) (Area Code & Daytime Telephone Number) (Certificate of Status & Certificate of Status & Certificate of Status & Certificate of Status & Certified Copy (additional copy is enclosed) (AILING ADDRESS: (City/State and Zip Code) (Area Code & Daytime Telephone Number) (Certificate of Status & Certificate of Status & Certificate of Status & Certified Copy (additional copy is enclosed) (Certificate of Status & Certified Copy (additional copy is enclosed) (Certificate of Status & Certified Copy (additional copy is enclosed) (Certificate of Status & Certified Copy (additional copy is enclosed) (Certified Copy (additional copy is enclosed)	

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is						
U.S. Medical Consultants of Fl	orida,	Trc	· · »			
2. The Articles of Organization were filed on	, 18, 20	105	and ass	igned doo	cument	number
3. The date the dissolution was approved:	ber 18,	2006				
4. A description of occurrence that resulted in the limit 608.441, Florida Statutes, (copy 608.441 on back c	ited liability over letter).	company's	dissolution	pinsuant CH	Gecti ∰	ion
Upon the written consent of al	ll the m	nembers	of the	Late C	~	(MICHE)
				SG		S Company
				<u> mo</u>	PH	111
				-1-01 -1-01	<u>~</u>	
5. CHECK ONE:				器		
X All debts, obligations and liabilities of the OR-Adequate provision has been made for the	•					
 All remaining property and assets have been distributed rights and interests. 	outed among	; its member	s in accorda	ince with	their re	spective
7. CHECK ONE:						
X There are no suits pending against the con	npany in any	court.	•			
OR- Adequate provision has been made for the entered against it in any pending suit.	satisfaction	of any judg	ment, order	or decree	which	ı may be
gnatures of the members having the same percentage of	of membersh	ip interests	necessary to	approve	the dis	solution
Signature			Printed	l Name		
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