

L05000060114

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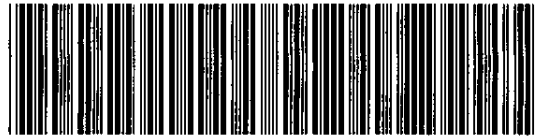
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10 JAN 19 AM 11:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. Collins

JAN 20 2010



PHYSICIANS

Kishore K. Dass, MD

Board Certified Radiation Oncologist
Diplomate, American Board of Radiology

Ben H. Han, MD

Board Certified Radiation Oncologist
Diplomate, American Board of Radiology

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Ignacio Castellon, MD

Board Eligible Radiation Oncologist

Judy Armstrong, ARNP, OCN

Certified Family Nurse Practitioner
Oncology Certified Nurse

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3355 Burns Road, Suite 105
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3343 State Road 7
Wellington, FL 33449
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CONSULTATION ONLY

Belle Glade

1200 S. Main Street, Suite 100
Belle Glade, FL 33430
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January 11, 2010

State of Florida

Registration Section

Divisions of Corporations

P.O. Box 6327

Tallahassee, FL 32314

RE: SOUTH FLORIDA BRACHYTHERAPY: L05000060114

Attached please find the Articles of Dissolution for a Limited Liability Company for the above referenced.

If I can be of further assistance, please do not hesitate to contact me.

Sincerely,

Kishore Dass
Owner/Manager
56795-9845

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SOUTH Florida Brachytherapy, 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:

Kishore Das
(Name of Person)
South Florida Radiation Oncology
(Firm/Company)
3343 State Rd 7
(Address)
Wellington, FL 33449
(City/State and Zip Code)

For further information concerning this matter, please call:

Ravi Patel at (561) 795-9845
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

FILED
10 JAN 19 AM 11:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is

SOUTH Florida Brachytherapy, LLC

2. The Articles of Organization were filed on 7-14-05 and assigned document number

LC5000060114

3. The date the dissolution was approved: 12-31-09

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).

Company purpose obsolete & being orderly dissolved

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:

X [Signature]
X [Signature]

Printed Name

Kishore Dass
Ben Han