## 105000111577

| (Requestor's Name)                      |                   |             |  |  |
|---|-------------------|-------------|--|--|
| (Address)                               |                   |             |  |  |
| (Address)                               |                   |             |  |  |
| (Cit                                    | ty/State/Zip/Phon | e #)        |  |  |
| PICK-UP                                 | ☐ WAIT            | MAIL        |  |  |
| (Business Entity Name)                  |                   |             |  |  |
| (Document Number)                       |                   |             |  |  |
| Certified Copies                        | _ Certificates    | s of Status |  |  |
| Special Instructions to Filing Officer: |                   |             |  |  |
|   |                   |             |  |  |
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SECRETARY OF STATE
SECRETARY OF STATE

## **COVER LETTER**

|                            | ration Section on of Corporations  |                            |                   |                |
|----------------------------|--|----------------------------|-------------------|----------------|
| CURIECE                    | MERCY AIRLIFT, LLC (Name of Limited Liability Company)   |                            |                   |                |
| SUBJECT: _                 | (Name of Limited Liability Company)  |                            | -                 |                |
|                            | ( · · · · · · · · · · · · · · · · · · ·  |                            |                   |                |
|                            |  |                            |                   |                |
| The enclosed A             | rticles of Dissolution and fee(s) are submitted for filing.  |                            |                   |                |
| Please return al           | l correspondence concerning this matter to the following:  |                            |                   |                |
|                            |  |                            |                   |                |
|                            | KURT F. BOSSHARDT  |                            |                   |                |
|                            | KURT E. BOSSHARDT (Name of Person)   |                            |                   |                |
|                            | <u>.</u>   |                            |                   |                |
|                            | KURT BOSSHARDT & ASSOCIATES, P.A.  |                            |                   |                |
|                            | (Firm/Company)   | TAT<br>SE                  | 0                 |                |
|                            | 1/m cr 172 cr com 100  | L CR                       | ال 7              | ú              |
|                            | 1600 SE 17' ST. SUITE 405<br>(Address)   | 포인                         | 2                 | t.Z            |
| Dietin.                    | of the Contract of the Contrac | 358<br>A31                 | 2                 | 1              |
| 26 - 1949a                 | (City/State and Zip Code)  | m O                        | 07 JAN 12 PH 1: 1 | D B Ball Frank |
|                            | (City/State and Zip Code)  | 10<br>10<br>10<br>10<br>10 | <del></del>       | 7              |
|                            | •  | RED.                       | 8                 | H.             |
| For further info           | rmation concerning this matter, please call:   | ₽                          |                   |                |
|                            | KURT F BOSSUARDS 054 764 7777  | •                          |                   |                |
|                            | KURT E. BOSSHARDT at (954) 764 · 7772  (Name of Person) (Area Code & Daytime Telephone Num   | ber)                       | _                 |                |
|                            |  | ,                          |                   |                |
| Enclosed is a che          | ck for the following amount:   |                            |                   |                |
| <b>√ \$</b> 25.00 Filing I |  | ing Fee,                   |                   |                |
| _                          | Certificate of Status Certified Copy Certificate of (additional copy is enclosed) Certified Cop  | Status &                   |                   |                |
|                            | (additional copy is enclosed) (additional co   | py is encl                 | osed)             |                |
|                            |  |                            |                   |                |
|                            |  |                            |                   |                |
| •                          | MAILING ADDRESS: STREET/COURIER ADDI   | RESS:                      |                   |                |
| •                          | Registration Section Registration Section Division of Corporations Division of Corporations  |                            |                   |                |
|                            | P.O. Box 6327 Clifton Building   |                            |                   |                |
|                            | Tallahassee, FL 32314 2661 Executive Center Circle   | е .                        |                   |                |
|                            | Tallahassee, FL 32301  |                            |                   |                |

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

| 1. The name of a limited liability company is   |   |  |
|---|---|--|
| MERCY AIRLIFT L   | LC  |  |
| 2. The Articles of Organization were filed on November LOSOOO       577   |   |  |
| 3. The date the dissolution was approved:   | 12 h 2007   |  |
| 4. A description of occurrence that resulted in the limited lie 608.441, Florida Statutes, (copy 608.441 on back cover lie  | ability company's dissolution pursuant & Section        |  |
| UPON THE WRITTEN CONSENT  | OF ALL MEMBERS TO THE HAT A                             |  |
| LIMITED LIABILITY COMPANY   | ARY OF SSEE F   |  |
|   | FINAL STA   |  |
| 5. CHECK ONE:   | D   |  |
| <ul> <li>6. All remaining property and assets have been distributed a rights and interests.</li> <li>7. CHECK ONE:  There are no suits pending against the company OR- Adequate provision has been made for the satisfactories against it in any pending suit.</li> </ul> |   |  |
| ignatures of the members having the same percentage of mem  | bership interests necessary to approve the dissolution: |  |
| Signature   | Printed Name  |  |
|   | KURT E. BOSSHARDT                                       |  |
|   |   |  |
|   |   |  |
| ·   | 4-4   |  |
| •   | •   |  |