

2060000/1060

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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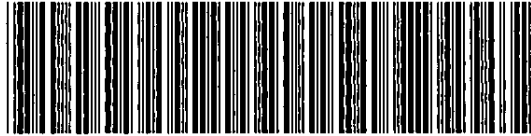
Special Instructions to Filing Officer:

A. LUNT

MAR 20 2008

EXAMINER

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03/19/08--01017--022 **25.00

2008 MAR 19 P 1:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Hospital Supply Chain Services, 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:

Michael Goodson

(Name of Person)

(Firm/Company)

9625 Commodore Drive

(Address)

Seminole, FL 33776

(City/State and Zip Code)

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TALLAHASSEE, FLORIDA

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For further information concerning this matter, please call:

Michael Goodson

(Name of Person)

at (727) 440-1817

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:



\$25.00 Filing Fee



\$30.00 Filing Fee &
Certificate of Status



\$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)



\$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**

1. The name of a limited liability company is

Hospital Supply Chain Services, LLC

2. The Articles of Organization were filed on January 31, 2006 and assigned document number L06000011060

3. The date the dissolution was approved: March 15, 2008

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).

The LLC was unable to generate enough new business to sustain profitability.

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. 608.442.

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.

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2008 MAR 9 10:29
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TALLAHASSEE, FLORIDA

Signatures of the members having the same percentage of membership interests necessary to approve the dissolution:

Signature

Printed Name

Michael Goodson

Michael Goodson

Linda Darin

Linda Darin