

LO60000 11237

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

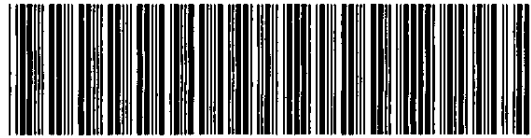
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SECRETARY OF STATE
TALLAHASSEE FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Advanced Medical Healthcare Associates, 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:

Linda Varisco, DC
(Name of Person)

Advanced Medical Associates
(Firm/Company)

7000 W. Oakland Park Blvd., Suite 202
(Address)

Sunrise, FL 33313
(City/State and Zip Code)

For further information concerning this matter, please call:

Rachel Levy
(Name of Person)

at (954) 572-1099
(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)

*check already sent in the
amount of \$35.00

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

07 APR 26 AM 7:55

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 17, 2007

LINDA VARISCO, DC.
7000 W. OAKLAND PARK BLVD., SUITE 202
SUNRISE, FL 33313

SUBJECT: ADVANCED MEDICAL HEALTHCARE ASSOCIATES, LLC
Ref. Number: L06000011237

We have received your document for ADVANCED MEDICAL HEALTHCARE ASSOCIATES, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6984.

Deborah Bruce
Document Specialist

Letter Number: 407A00025708

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07 APR 26 AM 7:55
SECRETARY OF STATE
TALLAHASSEE FLORIDA

**ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is

Advanced Medical Healthcare Associates

2. The Articles of Organization were filed on 1/31/06 and assigned document number

LC06000011237

3. The date the dissolution was approved: August 1, 2006

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).

All members agreed to the dissolution of the company (consented
in writing (C))

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:

Signature

Linda Varisco, DC

Printed Name

Linda Varisco, DC