

LDPODDA/825

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

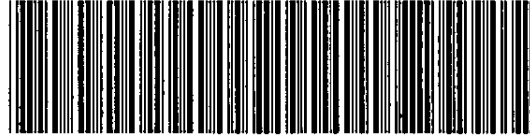
(Document Number)

Certified Copies _____ Certificates of Status _____

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707

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05/31/16--01028--007 **61.25

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
16 MAY 31 PM 3:03

JUN 22 2016
S. YOUNG



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
2016 JUN 22 PM 1:22
TALLAHASSEE, FLORIDA

June 3, 2016

RACHEL BOTTS
2352 OSCEOLA BLVD
PENSACOLA, FL 32503

SUBJECT: PENSACOLA EAR, NOSE AND THROAT, P.L.
Ref. Number: L06000021825

RECEIVED
16 MAY 31 PM 3:03
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

We have received your document for PENSACOLA EAR, NOSE AND THROAT, P.L. and your check(s) totaling \$61.25. 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) 245-6051.

Shelia H Young
Regulatory Specialist II

Letter Number: 416A00011740

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Pensacola Ear, Nose and Throat, P.L.
(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:

Kevin Botts

(Name of Person)

(Firm/Company)

2352 Osceola Blvd

(Address)

Pensacola, FL 32503

(City/State and Zip Code)

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SECRETARY OF FLORIDA
TALLAHASSEE, FLORIDA
16 MAY 31 PM 3:03

For further information concerning this matter, please call:

Rachel Botts

(Name of Person)

at (850) 982 8572

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee and Certificate of Dissolution

Please use the \$61.25
we already sent

☐ \$55.00 Filing Fee, Certificate of Dissolution &
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

Pensacola Ear, Nose and Throat, P.L.

2. The Articles of Organization were filed on 02/28/2006 and assigned

document number LO6000021825

3. The delayed effective date the dissolution if not effective on the date of filing: _____
(effective date cannot be prior to or more than 90 days later than date document is received for filing)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).

The business was purchased by Baptist
Medical Group on October 01, 2014

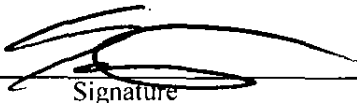
16 MAY 31 PM 3:03

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:

Kevin Botts
2352 Osceola Blvd
Pensacola, FL 32503

6. Signature of an authorized person or if there are no members, the signature of the person appointed and listed above to wind up the company's activities and affairs:


Signature

Kevin Botts
Printed Name

FILING FEE: \$25.00

Notice of Limited Liability Company Dissolution

NOTE: This page is optional

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company: Pensacola Ear, Nose and Throat, P.C.

Document number of Limited Liability Company is: LO6000021825

Date of dissolution was: 10/01/2014

Description of information that must be included in a written claim:

FILED
STATE
SECRETARY OF
TALLAHASSEE, FL 32309
16 MAY 31 PM 3:03

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

2352 Osceola Blvd
Pensacola, FL 32503

A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Kevin Botts

Printed Name of the Person Filing



Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00