Florida Department of State

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(((H060000741953)))

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To:

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Fax Number : (850)205-0383

From:

Account Name : NEIL S. SCHECHT, P.A.

Account Number : 120030000065 Phone : (813)353-9500 Fax Number : (813)350-0300

LLC DISS/WITH OR REV DISS

ZIMMER BOLING, LLC

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ION OF CORPORATION

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March 27, 2006

FLORIDA DEPARTMENT OF STATE
Division of Corporations

ZIMMER BOLING, LLC 581 MARMORA AVENUE TAMPA, FL 33606US

SUBJECT: ZIMMER BOLING, LLC

REF: L06000022821

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Number three of the document must contain the date the decision to dissolve was approved or became effective. This date must be prior to the date this document was submitted for filling.

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, \tilde{p} lease. call (850) 245-6020.

Tammi Cline Document Specialist FAX Aud. #: #06000074195 Letter Number: 506A00020414

H060000741953

	CO	VER LETTER	
	on Section of Corporations		•
SIBJECT: ZIM	MER BOLING, LLC		
DOMINION.		imited Liability Company)	
The enclosed Artic	les of Amendment and fee(s) are su	bmitted for filing.	,
Please return all co	rrespondence concerning this matte	er to the following:	
N	eil S. Schecht	-	
	((Name of Person)	
<u>_N</u>	leil S. Schecht, P.A.		
	•	(Firm/Company)	
<u>3</u>	630 W. Kennedy Blv		
		(Address)	
T	ampa, FL 33609		
	. (City	(State and Zip Code)	127 IM 8: 35 INSSES 10
For further informa	tion concerning this matter, please	call:	
		040 000 0	F00
Nell S.	Schecht (Name of Person)	(Area Code & Daytime	
	(,,		•
Enclosed is a check for	or the following amount:		
□ \$25.00 Filing F∞	S30.00 Filing Fee & Certificme of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)
=-	IAILING ADDRESS:		RIER ADDRESS:
	egistration Section division of Corporations	Registration Sect Division of Corp.	
P	.O. Box 6327	Clifton Building	
T	allahassee, FL 32314	2661 Executive (Center Circle

Tallahassee, FL 32301

H060000741953

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

2. The Articles of Organization were filed on 03/0	2/06 and assigned document number
L06000022821	
3. The date the dissolution was approved: 03-0	*
 A description of occurrence that resulted in the li 608.441, Florida Statutes, (copy 608.441 on back 	mited liability company's dissolution pursuant to section cover letter).
initial filing made in error	
	700 5
5. CHECK ONE:	
	ne limited liability company have been paid or discharged
OR-	
• '	ne debts, obligations and liabilities pursuant to s. 608,4421.
 All remaining property and assets have been disting rights and interests. 	ributed among its members in accordance with their respective
7. CHECK ONE:	
There are no suits pending against the co	many in any court
OB	• •
entered against it in any pending suit.	ne satisfaction of any judgment, order or decree which may be
gnatures of the members having the same percentage	of membership interests necessary to approve the dissolution:
Signature	Printed Name
1/2 1 201.	Alon D. Poling
Me History	Alan D. Boling

FILING FEE: \$25.00