

W4 0000 31625

Florida Department of State  
Division of Corporations  
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H08000269128 3))



H080002691283ABC3

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations  
Fax Number : (850) 617-6383

From: Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (850) 222-1092  
Fax Number : (850) 878-5926

2008 DEC -8 AM 8:25  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

LLC DISS/WITH OR REV DISS

MAHAN MEDICAL, LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$55.00

T. CLINE

DEC - 9 2008

EXAMINER

RECEIVED  
08 DEC -8 PM 1:51  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

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

1. The name of a limited liability company is  
Muhan Medical, LLC

2. The Articles of Organization were filed on 03/24/2006 and assigned document number  
L06000031625

3. The date the dissolution was approved: December 2, 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).

Dissolution occurred upon the written consent of the sole member of the limited liability company.

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. 608.441.

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.

2008 DEC - 8 AM 8:25  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

FILED

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

Signature  
*Dora A. Blackwood*  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Printed Name  
Dora A. Blackwood, VP and Secretary of  
Hospital Corp., LLC, its sole member  
\_\_\_\_\_  
\_\_\_\_\_

**FILING FEE: \$25.00**