## L0000080917

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phone	<del>o</del> #)
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(Do	ocument Number)	
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SECRETARY OF STATE
TALLAHASSEE, FLORID

## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: Medical Safety Solut		
(Nam	ne of Limited Liability Company)	
The enclosed Articles of Dissolution and fee(s)	are submitted for filing.	
Please return all correspondence concerning this	s matter to the following:	
Serge de Winter		
	(Name of Person)	
Medical Safety Sol	utions, LLC	
***************************************	(Firm/Company)	
630 Rock Hill Ave		
	(Address)	
Davie, Florida 3332	25	
	(City/State and Zip Code)	
For further information concerning this matter,	please call:	
Serge de Winter	at ( 954 ) 495-8088	
(Name of Person)	(Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:	•	
\$25.00 Filing Fee 30.00 Filing Fee & Certificate of Sta		
MAILING ADDRESS: Registration Section	STREET/COURIER ADDRESS: Registration Section	
Division of Corporations		
P.O. Box 6327	Clifton Building	
Tallahassee, FL 32314	2661 Executive Center Circle	

Tallahassee, FL 32301



May 1, 2007

SERGE DE WINTER 630 ROCK HILL AVENUE DAVIE, FL 33325

SUBJECT: MEDICAL SAFETY SOLUTIONS, LLC

Ref. Number: L06000080917

We have received your document for MEDICAL SAFETY SOLUTIONS, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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 filing.

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) 245-6967.

Letter Number: 507A00030098

Leslie Sellers Document Specialist

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

FILED

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The name of a limited liability company is     Medical Safety Solutions, LLC	SECRETARY OF STATE TALLAHASSEE. FLORIDA
2. The Articles of Organization were filed on August 16th, 200 L06000080917	6 and assigned document number
3. The date the dissolution was approved: 04-01-2007	
4. A description of occurrence that resulted in the limited liability comp. 608.441, Florida Statutes, (copy 608.441 on back cover letter).	any's dissolution pursuant to section
No transactions were made and the LLC was r	
5. CHECK ONE:	
All debts, obligations and liabilities of the limited liability co	ompany have been paid or discharged.
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 merights and interests.	embers in accordance with their respective
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 entered against it in any pending suit.	judgment, order or decree which may be
gnatures of the members having the same percentage of membership inte	rests necessary to approve the dissolution:
Signature	Printed Name
Ser Ser	ge de Winter
•	
,	

FILING FEE: \$25.00