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STATEMENT OF TERMINATION

Pursuant to section 605.0709(7), Florida Statu Termination:	tes, I hereby submit the following Statement of
FIRST: The name of the limited liability com	pany is:
St. Lucie Medical Center Walk-In Clinic, LLC	
SECOND:	
The date of filing of the initial articles	of organization is: 09/14/2006
THIRD: The date of filing of the dissolution 09/29/2020	is:
FOURTH: This limited liability company has determined that it will file a statement of	s completed winding up its activities and affairs and termination.
Signature of Althorized Representative	Natalie H. Cline Typed or printed name of signature

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CR2E141 (12/13)