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Division of Corporations

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**L06000099247**

Florida Department of State  
Division of Corporations  
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To:

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

From:

Account Name : GREENBERG TRAUIG - FORT LAUDERDALE  
Account Number : I20040000196  
Phone : (954) 765-0500  
Fax Number : (954) 765-1477

**FILED**  
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**LLC DISS/WITH OR REV DISS**

**HOME HEALTH AGENCY - SOUTHWESTERN PA, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$55.00

**D. BRUCE**

JUN 22 2009

**EXAMINER**

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

1. The name of a limited liability company is  
HOME HEALTH AGENCY - SOUTHWESTERN PA, LLC
2. The Articles of Organization were filed on October 10, 2006 and assigned document number  
L06000099247
3. The date the dissolution was approved: March 31, 2009
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).  
Consent of sole member

## 5. CHECK ONE:

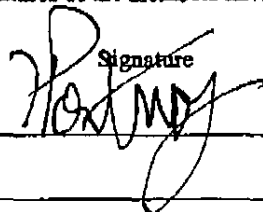
- ☐ All debts, obligations and liabilities of the limited liability company have been paid or discharged.  
-OR-  
☒ Adequate provision has been made for the debts, obligations and liabilities pursuant to section 608.441.

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.

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

✓   
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Printed Name

OMNI HOME HEALTH SERVICES, LLCBy: Fred Portnoy, President  
\_\_\_\_\_  
\_\_\_\_\_

FILING FEE: \$25.00

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