

20600011129

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

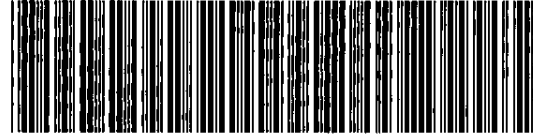
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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200207651432  
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FILED  
11 MAY 25 AM 10:21  
STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

B. BOSTICK  
MAY 26 2011  
EXAMINER

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** RIGHT ACCORD PRIVATE DUTY HOME CARE SERVICES, LLC  
(Name of Limited Liability Company)

The enclosed Articles of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ROSEMARIE TAMUNOY  
(Name of Person)  
RIGHT ACCORD PRIVATE DUTY - HOME HEALTH CARE, LLC  
(Firm/Company)  
5549 PALMER CROSSING CIR  
(Address)  
SARASOTA, FL 34233  
(City/State and Zip Code)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

ROSEMARIE TAMUNOY at ( 941 ) 957-8267 (r) & 366-0801  
(Name of Person) (Area Code & Daytime Telephone Number) (off.)

Enclosed is a check for the following amount:

- \$25.00 Filing Fee
- 30.00 Filing Fee & Certificate of Status
- \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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

1. The name of a limited liability company is

RIGHT ACCORD PRIVATE DUTY - HOME CARE SERVICES, LLC

2. The Articles of Organization were filed on 11/16/06 and assigned document number

LOG000111129

3. The date the dissolution was approved: APRIL 29, 2011

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).

Company has now ceased all operations and no longer exists

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. 608.4421.

6. All remaining property and assets have been distributed among its members in accordance with their respective rights and interests.

7. CHECK ONE:

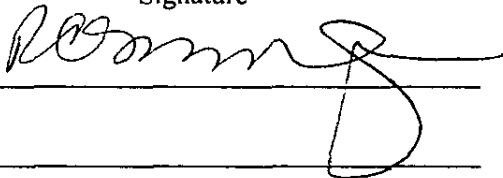
- There are no suits pending against the company in any court.  
-OR-  
 Adequate provision has been made for the satisfaction of any judgment, order or decree which may be entered against it in any pending suit.

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11 MAY 29 AM 10:11  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

Signature

Printed Name

  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

ROSEMARIE TOMUNI  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 18, 2011

ROSEMARIE TAMUNON  
RIGHT ACCORD PRIVATE DUTY HOME CARE SER  
5549 PALMER CROSSING CIRCLE  
SARASOTA, FL 34233

SUBJECT: RIGHT ACCORD PRIVATE DUTY-HOME CARE SERVICES, LLC  
Ref. Number: L06000111129

We have received your document for RIGHT ACCORD PRIVATE DUTY-HOME CARE SERVICES, LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A description of the occurrence that resulted in the limited liability company's dissolution pursuant to section 608.441, Florida Statutes, must be contained in the document.

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) 245-6028.

Barbara Bostick  
Regulatory Specialist II

Letter Number: 311A00012325