07000012105

| (Re | equestor's Name) | | |
|---|-------------------------------------|------|--|
| (Ac | ddress) | | |
| (Ac | idress) | | |
| (Ci | ty/State/Zip/Phon | e #) | |
| PICK-UP | ☐ WAIT | MAIL | |
| (Ви | usiness Entity Nar | ne) | |
| (Document Number) | | | |
| Certified Copies | ified Copies Certificates of Status | | |
| Special Instructions to Filing Officer: | | | |
| | | | |
| | | | |
| | | | |
| | | | |

Office Use Only



200211807892

09/09/11--01012--022 **30.00

SECRETARY OF STATE

J. BRYAN

SEP 1 2 2011

EXAMINER

COVER LETTER

| | egistration Section ivision of Corporations | |
|----------------------------------|--|--|
| SUBJECT | : WILLIAM PENA, MD, LLC. (Name of Limited Liability Company) | |
| The enclos | ed Articles of Dissolution and fee(s) are submitted for filing. | |
| Please retu | rn all correspondence concerning this matter to the following: | |
| | WILLIAM PENA | E on E |
| | (Name of Person) | SEP- |
| | WILLIAM PENA, MD, LLC. | EP-9 PM 2: 28 AHASSEE, FLORIG |
| | (Firm/Company) | TOP 2 C |
| | P.O. BOX 260340 | 23 |
| | PEMBROKE PINES, FL 33026 | 200 |
| | (City/State and Zip Code) | |
| For further | information concerning this matter, please call: | |
| WILLIAM PENA at (954) 439-8859 | | |
| | (Name of Person) (Area Code & Daytime Tel | lephone Number) |
| Enclosed is | a check for the following amount: | |
| \$25.00 Fi | Certificate of Status 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 A LIMITED LIABILITY COMPANY

SER SALES 1. The name of a limited liability company is WILLIAM PENA, MD, LLC. 2. The Articles of Organization were filed on FEBRUARY 02, 2007 and assigned document number L07000012105 3. The date the dissolution was approved: APRIL 31, 2010 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). NO BUSINESS FOR SELLING PRACTICE 5. CHECK ONE: All debts, obligations and liabilities of the limited liability company 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 members in accordance with their respective rights and interests. 7. CHECK ONE: ✓ There are no suits pending against the company in any court. 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 Signature WILLIAM PENA William

FILING FEE: \$25.00