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EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Integrated Dermatology of Boca 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:	
Gerard Christopher	_
(Name of Person)	_
Integrated Dermatology Group	
(Firm/Company)	
902 Clint Moore Road Suite 226	755
(Address)	AND SELECTION AND AND AND AND AND AND AND AND AND AN
Boca Raton, FL 33487	95 P
(City/State and Zip Code)	
For further information concerning this matter, please call:	THE STATE
Steven Strohl at 314-2000	***
(Name of Person) (Area Code & Daytime Telephone Nu	mber)
Enclosed is a check for the following amount:	
Certificate of Status Certified Copy Certificate of (additional copy is enclosed) Certified Co	
MAILING ADDRESS STREET/COURIER ADD	ndfee.

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

Registration Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

Integrated Dermatology of Boca Li	
2. The Articles of Organization were filed on 1/1/L07000020586	/2008 and assigned document number
3. The date the dissolution was approved: 2/28/2	2011
	imited liability company's dissolution pursuant to section
- Dusiness Closed	
5. CHECK ONE:	
-OR-	he limited liability company have been paid or discharged. he debts, obligations and liabilities pursuant to \$4608.4421.
6. All remaining property and assets have been dist rights and interests.	tributed among its members in accordance with their respective.
7. CHECK ONE:	
There are no suits pending against the co	- 1 · 1 · 1 · 1 · 1 · 1 · 1 · 1 · 1 · 1
Adequate provision has been made for t entered against it in any pending suit.	he satisfaction of any judgment, order or decree which may be
signatures of the members having the same percentage	e of membership interests necessary to approve the dissolution:
Signature	Printed Name
M C	Gerard Christopher
	And the second s
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FILING FEE: \$25.00