

LO7000030383

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

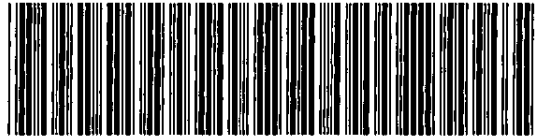
LO7-30383

(Document Number)

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08 APR 17 PM 3:45

SECRETARY OF STATE
TALLAHASSEE FLORIDA

APR 17 2008

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ARTICLES OF DISSOLUTION FOR "QUANTE ANESTHESIA SERVICES"

DOCUMENT NUMBER: _____

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ALESIA QUANTE
(Name of Contact Person)

QUANTE ANESTHESIA SERVICES
(Firm/Company)

PO BOX 14243
(Address)

SAVANNAH, GA 31406
(City/State and Zip Code)

For further information concerning this matter, please call:

ALESIA QUANTE at (561) 951-1300
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status ☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) ☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)

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

STREET ADDRESS:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 1, 2008

ALESIA QUANTE
PO BOX 14243
SAVANNAH, GA 31416

SUBJECT: QUANTE ANESTHESIA SERVICES, LLC
Ref. Number: L07000030383

We have received your document for QUANTE ANESTHESIA SERVICES, LLC and your check(s) totaling \$35.00. 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) 245-6067.

Neysa Culligan
Document Specialist

Letter Number: 108A00011619

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

FILED

08 APR 17 PM 3:45

SECRETARY OF STATE
TALLAHASSEE FLORIDA

1. The name of a limited liability company is

QUANTE ANESTHESIA SERVICES LLC

2. The Articles of Organization were filed on 3/14/2007 and assigned document number

L070000230383

3. The date the dissolution was approved: 3/14/2008

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).

I moved to Georgia and have opened an S corp
there rather than pay tax on "foreign", i.e. out of state,
company.

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.

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

Signature

Printed Name

Alexia Quante

ALEXIA QUANTE