

LD7000040905

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

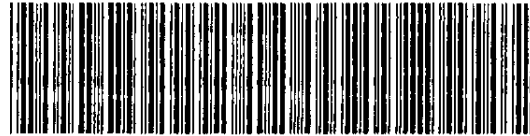
Special Instructions to Filing Officer:

L. SELLERS

APR 19 2011

EXAMINER

Office Use Only



200198363272

03/21/11--01016--002 **43.75

FILED
11 APR 18 PM 5:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Dissolution of Case Management Concepts, LLC

DOCUMENT NUMBER: L07000040905

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

Please return all correspondence concerning this matter to the following:

Sheyla J Wallace

(Name of Contact Person)

Case Management Concepts, LLC

(Firm/Company)

2020 NE 135th Street #406

(Address)

North Miami, FL 33181

(City/State and Zip Code)

For further information concerning this matter, please call:

Sheyla J Wallace

(Name of Contact Person)

at (954) 547-3690

(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

March 23, 2011

SHEYLA J. WALLACE
2020 NE 135TH STREET #406
NORTH MIAMI, FL 33181

SUBJECT: CASE MANAGEMENT CONCEPTS, LLC
Ref. Number: L07000040905

We have received your document for CASE MANAGEMENT CONCEPTS, LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

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) 245-6967.

Leslie Sellers
Regulatory Specialist II

Letter Number: 911A00007094

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

1. The name of a limited liability company is
Case Management Concept, LLC

2. The Articles of Organization were filed on 4-16-2007 and assigned document number
L07000040905

3. The date the dissolution was approved: 3-15-2011

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).

608.441 (1) C. I am the only member of this Limited Liability Corporation
and I give written consent for dissolution of Case Management Concepts, LLC

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
Sheyla Wallace

Printed Name
Sheyla Wallace

FILED
11 APR 18 PM 5:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILING FEE: \$25.00