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L07000045092

\_\_\_\_\_  
(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:

Office Use Only



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2014 JAN 16 PM 1:25  
TALLAHASSEE, FLORIDA

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BY: [illegible]

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Cybersurgery Associates, 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:

Joseph P Bornstein

(Name of Person)

(Firm/Company)

7012 Portmarnock Pl

(Address)

Lakewood Ranch, Florida 34202

(City/State and Zip Code)

For further information concerning this matter, please call:

Joseph P. Bornstein

(Name of Person)

at ( 941 ) 907-1268

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

\$25.00 Filing Fee and Certificate of Dissolution

\$55.00 Filing Fee, Certificate of Dissolution &  
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

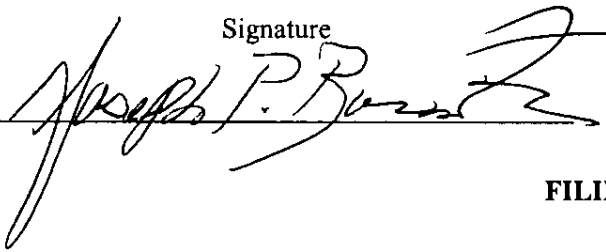
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TALLAHASSEE, FL 32301

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

1. The name of a limited liability company is  
Cybersurgery Associates, LLC
2. The Articles of Organization were filed on April 27, 2007 and assigned  
document number L07000045092
3. The delayed effective date the dissolution if not effective on the date of filing: \_\_\_\_\_
4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section  
605.0707, Florida Statutes, (copy 605.0707 on back cover letter).  
Sale of all assets and liquidation and distribution to all Members  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
5. If there are no members, enter the name and address of the person appointed to wind up the company's  
activities and affairs: Joseph P. Bornstein  
7012 Portmarnock Pl  
Lakewood Ranch, FL 34202  
\_\_\_\_\_
6. Signature of an authorized person or if there are no members, the signature of the person appointed and listed  
above to wind up the company's activities and affairs:

Signature

Printed Name



Joseph P. Bornstein

**FILING FEE: \$25.00**

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