# L07000066673

(Requestor's Nar	ne)
(Address)	
(Address)	
,	
(0: 10: 10: 10: 10:	
(City/State/Zip/Pt	none #)
	<b>—</b>
PICK-UP WAIT	MAIL
(Business Entity	Name)
	·
/Denument Numb	
(Document Numb	Jei)
Certified Copies Certification	ates of Status
Special Instructions to Filing Officer:	
Special instructions to Filing Officer.	1
	ı

Office Use Only



300174937573

04/19/10--01057--024 \*\*30.00



S. HAWKES

APR 2 0 2010

EXAMINER



April 13, 2010

Registration Section Division of Corporations PO Box 6327 Tallahassee, FL 32314

To Whom It May Concern:

This letter is being sent to notify The Division of Corporations that we have attached the forms in regards to dissolving a Florida Limited Liability Company.

Please feel free to contact me at the phone number provided below if you have any additional questions. In addition our return address is: 5501 W Gray St. Tampa, FL 33609

Regards,

Crystal Winkler, PHR Sr. HR Generalist 813-569-6500 x6626

SURGERY PARTNERS CORPORATE OFFICE

# **COVER LETTER**

Division of Corporations
SUBJECT: New Tampa Anesthesia Services, 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:
William Milo
(Name of Person)
Surgery Partners
(Firm/Company)
5501 W Gray St
(Address)
Tampa, FL 33609
(City/State and Zip Code)
For further information concerning this matter, please call:
William Milo at ( 813 ) 569-6500
(Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)

### **MAILING ADDRESS:**

TO:

Registration Section

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 FOR A LIMITED LIABILITY COMPANY

and assigned document numbers of the solution pursuant to section esthesia Services, LLC
esthesia Services, LLC
esthesia Services, LLC
esthesia Services, LLC
ities pursuant to s. 608.4421.
accordance with their respective
t, order or decree which may be
ssary to approve the dissolution:
Printed Name
oyle, CEO