## LU7 UUU00 73130

(Re	questor's Name)			
(Ad	ldress)			
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificate	s of Status		
Special Instructions to Filing Officer:				

Office Use Only

B. KOHR

APR 1 9 2012

EXAMINER



000229355970

04/16/12--01030--028 \*\*25.00

12 APR 16 PH 3: 16

SECRETARY OF SOLVED AT INVESTIGATIONS



TO:

Registration Section Division of Corporations

SUBJECT: PELVIC REHABILITATION OF TAMPA, 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:

SHAYNE TARRANCE
(Name of Person)
PELVIC REHABILITATION OF TAMPA, LLC
(Firm/Company)
16044 SHINNECOCK DRIVE
(Address)
ODESSA, FL 33556
(City/State and Zip Code)

For further information concerning this matter, please call:

ALTON CATES, CPA

	(Name of Person)	(Area Code & Daytime Telephone Number)	
Enclosed is a check for the \$25.00 Filing Fee	ne following amount:  30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy
			(additional copy is enclosed)

813

## **MAILING ADDRESS:**

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

## STREET/COURIER ADDRESS:

925-3803

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



## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

PELVIC REHABILITATION OF TAM	PA, LLC
2. The Articles of Organization were filed on 07/1 L07000073130	3/2007 and assigned document number
3. The date the dissolution was approved: 12/31/2	2011
	nited liability company's dissolution pursuant to section cover letter).
5. CHECK ONE:	
☐-OR-	e limited liability company have been paid or discharged. e debts, obligations and liabilities pursuant to s. 608.4421.
<ol><li>All remaining property and assets have been distri rights and interests.</li></ol>	buted among its members in accordance with their respective
7. CHECK ONE:	
There are no suits pending against the cor-OR-Adequate provision has been made for the entered against it in any pending suit.	mpany in any court.  e satisfaction of any judgment, order or decree which may be
Signatures of the members having the same percentage	of membership interests necessary to approve the dissolution:
Signature	Printed Name
Thayse Janance	SHAYNE TARRANCE
<u></u>	

**FILING FEE: \$25.00**