

107000075197

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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(Business Entity Name)

(Document Number)

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DEC - 8 2009

EXAMINER



700161977777

12/07/09--01011--022 **25.00

09 DEC - 7 PM 12: 24

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION



URGENT CARE FOR LIFE'S MINOR EMERGENCIES

12/2/09

Florida Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

RE: Document # L07000075197

Please find attached the form needed for the dissolution of Tequesta Urgent Care Physical Therapy and Rehab., LLC. This company was formed in July of 2007 but never took off. If you need any additional information please contact me directly at 561-747-4464.

Regards,

Iris Melecio,
Office Manager

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Tequesta Urgent Care Physical Therapy & Rehab.
(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:

Iris Melecio
(Name of Person)
Tequesta Urgent Care
(Firm/Company)
One Main street, Suite 102
(Address)
Tequesta, FL 33469
(City/State and Zip Code)

For further information concerning this matter, please call:

Iris Melecio at (561) 747-4464
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$25.00 Filing Fee
☐ \$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)

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

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION
09 DEC -7 PM 12:24

1. The name of a limited liability company is

Tequesta Urgent Care Physical Therapy & Rehab

2. The Articles of Organization were filed on July 20, 2007 and assigned document number

L07000075197

3. The date the dissolution was approved: 11/30/2009

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).

Company never took off.

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

[Signature]

Printed Name

Sylvie Rimmer