

**LO7000077073**

Florida Department of State  
Division of Corporations  
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**LLC DISSOLUTION OR WITHDRAWAL  
NORTHWEST FLORIDA WOMEN'S CANCER CARE, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

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J. SAULSBERRY  
 EXAMINER  
 JAN 3 2011

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Northwest Florida Women's Cancer Care, LLC  
(Name of Limited Liability Company)

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Dora A. Blackwood  
(Name of Person)

HCA Management Services, L.P.  
(Firm/Company)

One Park Plaza  
(Address)

Nashville, TN 37203  
(City/State and Zip Code)

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TALLAHASSEE, FLORIDA

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For further information concerning this matter, please call:

Dora A. Blackwood at ( 615 ) 344-2162  
(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**

1. The name of a limited liability company is  
Northwest Florida Women's Cancer Care, LLC

2. The Articles of Organization were filed on 7/25/2007 and assigned document number  
L07000077073

3. The date the dissolution was approved: 12/29/2010

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).  
written consent of the sole member

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**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

*Dora A. Blackwood*

Printed Name

HTI Hospital Holdings, Inc., sole member  
By: Dora A. Blackwood, Vice President and Secretary

**FILING FEE: \$25.00**