L07000086549

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EXAMINER



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10/15/09--01004--004 **25.00

SECRETARY OF STATE
STATE CORPORATIONS

09 OCT - P. AM ID: OC

CORLCVOLDS



FLORIDA DEPARTMENT OF STATE Division of Corporations

September 22, 2009

MICHAEL F. STIWICH 5715 CANTOR AVENUE NORTH PORT, FL 34286

SUBJECT: SW PHYSICAL THERAPY LLC

Ref. Number: L07000086549

OPOCT -8 MIG OF STATIONS OF ORDER OF CORPOR OF STATIONS

Please note that NO PAYMENT was received with this filing, and that NO PAYMENT has been retained.

. The fee to file an LLC Dissolution is \$25.00.

Please return your filing with a check made payable to "Florida Department of State."

If you have any questions concerning the filing of your document, please call (850) 245-6914.

Buck Kohr Regulatory Specialist II

Letter Number: 009A00031066

COVER LETTER

	ation Section n of Corporations	
SUBJECT:	SW Physical Thurapy LLC (Name of Limited Liability Company)	ON SEC
	(Name of Limited Liability Company)	OC SEE
The enclosed Art	ticles of Dissolution and fee(s) are submitted for filing.	ON THE OF CORPOR
Please return all	correspondence concerning this matter to the following:	130
	Michaul F. Stiwich	~ -
	(Name of Person)	
	(Firm/Company)	
	5715 CANTOR AVE	_
	(Address)	
	NORTH PORT, FLORIDA 34286 (City/State and Zip Code)	-
	(co)	
For further inform	mation concerning this matter, please call:	
\mathcal{M}_{i}	(Name of Person) at (352) 262 - 026 (Name of Person) (Area Code & Daytime Telephone Num	nber)
Enclosed is a check	k for the following amount:	
\$25.00 Filing Fe	Certificate of Status Certified Copy Certificate o Certified Copy is enclosed) Certified Co	f Status &

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 S W Physical Thorapy LLC	፝
2. The Articles of Organization were filed on <u>GUGU</u> <u>L07000086549</u>	
3. The date the dissolution was approved: 9/	16/09
	ited liability company's dissolution pursuant to section
SCREED GRON BY THE OFFICE	LS JOWNERS UF SW PHYSICAL THEREADY LLC
THE DISSULUTION OF SW PLAY	SILDS THURSPY LLC.
OR- Adequate provision has been made for the 6. All remaining property and assets have been distributing rights and interests. 7. CHECK ONE: There are no suits pending against the component of the component	limited liability company have been paid or discharged. debts, obligations and liabilities pursuant to s. 608.4421. buted among its members in accordance with their respective spany in any court. satisfaction of any judgment, order or decree which may be
Signatures of the members having the same percentage of	f membership interests necessary to approve the dissolution:
Signature Strick	Printed Name Nami M. Stiwich
Michael Stint	Michael Stiwich

MINUTES OF THE MEETING OF THE

SHAREHOLDERS OF

_ SW	Physical	Thorns	LLC
	[name of corporation	1 7 O	

neld on 9/16/09			-	7.3 -1.1	11.47.2
The following items, topic	and issues	s were	discussed:		
DISSOLUTION	OF	SW	PHYSICAL	THURSPY	LLC
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The meeting of the Shareholders was then, upon proper motion and duly seconded, adjourned.

Signature of Shareholders:

Date: 9/16/09

Date: 9/16/09

Date: _______

Date: _______