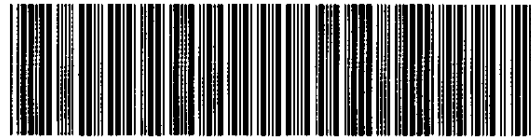


**L08000000071**



**300182986923**

07/08/10--01018--012 \*\*25.00

**FILED**  
2010 JUL -8 PM 1:49  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**C. LEWIS**

JUL 9 2010

**EXAMINER**

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only

**COVER LETTER**

**TQ:** Registration Section  
Division of Corporations

**SUBJECT:** The Practice, 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:

Alison Strange, Esquire

(Name of Person)

Bret Jones, P.A.

(Firm/Company)

700 Almond Street

(Address)

Clermont, Florida 34711

(City/State and Zip Code)

For further information concerning this matter, please call:

Alison Strange

(Name of Person)

at ( 352 ) 394-4025

(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  
2010 JUL -8 PM 4:43  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is  
The Practice, LLC

2. The Articles of Organization were filed on December 31, 2007 and assigned document number  
L08000000071

3. The date the dissolution was approved: June 18, 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).

Company is no longer in business

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

Printed Name

Andrew DeClercq  
DC 2

Andrew DeClercq

Daniel Cross, Jr.

FILED

ACTION BY WRITTEN CONSENT OF MEMBERS 2010 JUL -8 PM 10:45

of

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**THE PRACTICE, LLC**  
*(Annual Minutes)*


The undersigned, being all of the Members holding at least a majority capital interest in THE PRACTICE, LLC, a Florida limited liability company (the "Company"), do hereby take and adopt the following action in writing, without a meeting;

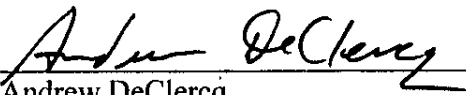
**RESOLVED**, that all the numerous acts and transactions which have been validly taken or made for and on behalf of the Company by the Managers since its formation and prior to the date of this Action, are hereby affirmed and ratified;

**FURTHER RESOLVED**, that the Members have elected to dissolve the Company and that the bank account(s) of the Company shall, after all expenses of dissolution are paid, be distributed equally between the Members.

Dated: June 18, 2010

MEMBERS

  
\_\_\_\_\_  
Daniel Cross

  
\_\_\_\_\_  
Andrew DeClercq